



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

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YMCA Homework Basketball Academy (MidCity) YMCA OF THE CAPITAL AREA

The great Pistol Pete Maravich created one of the most comprehensive instructional series ever produced that focused on 4 primary skills in the game of basketball: Dribbling, Ball-Handling, Passing and Shooting. The Y believes in the value of skill development for sports participants. This academy is designed to offer children the opportunity to learn and develop his/her skills using Pistol Pete's "Homework Basketball."

- Academy dates: April 9 14, 16, 21, 23, 28, 30 May 5, 7, 12, 14, 19
- Academy times: Mon 5:30-6:45PM (6-8 YR OLDS); SAT 9:15am-10:30am (6-8 YR OLDS)
Mon 6:45-8:00PM (9-12 YR OLDS); SAT 10:30am-11:45am (9-12 YR OLDS)
- Academy age groups: 6-8 year olds (must turn 6 on or before April 1st) and 9-12 year olds
- Academy fees: \$55 for members \$110 for program participants

WHEN: Registration deadline is April 5, 2018. Any one registering after that date will be charged a \$30 late fee IF SPACE ALLOWS. SPACE IS LIMITED TO 25 CHILDREN PER AGE GROUP!!!

LOCATION: A. C. LEWIS YMCA
350 North Foster Drive
Baton Rouge, LA 70806
Kevin Franklin ,Sports Director



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Circle One 6-8 year olds (must turn 6 on or before APRIL 1st) 9-12 year olds

Fee: Member \$55 / Program Participant \$110 Late Fee: \$30 after April 5th (IF SPACE ALLOWS)

Child's Name _____

Address _____ City/State/Zip _____

Primary Phone _____ Primary E-mail Address _____

Sex _____ Age _____ DOB ____/____/____ School _____ Grade _____

Mother's Name _____ Father's Name _____

Mother's Cell # _____ Father's Cell # _____

T-Shirt Size: Circle One 4-5 XSM 6-8 SM 10-12 MD 14-16 LG AS AM AL XL XXL

Refund Policy: Registration fees are non-refundable after the registration deadline. No Refund will be given for unmet requests for coach, team/teammate, or conflicts with practice and game sites or times. All qualifying refunds are subject to a \$25 administration fee.

The YMCA of the Capital Area does not provide accident or medical insurance for program participants. I recognize that participation in YMCA sponsored activities may expose my child to risk of injury. I agree to hold the YMCA harmless from any claims that may occur through participation to any property or injury to persons, which may occur through the participation in any activity at the YMCA, or in its programs. In cases of emergency or accident and I am unable to be contacted, I hereby grant the YMCA director or his/her agent to secure proper medical treatment and transportation for my child to an appropriate facility for treatment. I assume all financial responsibility for program fees incurred as result of my child participating in this YMCA program. I authorize the YMCA to use any images taken of my child for promotional purposes of the YMCA. My child's family members will adhere to YMCA Good Sportsmanship behavior. I have read and understood the above information. My child has permission to participate in this YMCA program in accordance with the conditions set forth above.

Signature of Parent or Guardian _____ Date _____

A. C. LEWIS YMCA
350 North Foster Drive
Baton Rouge, LA 70806
Kevin Franklin ,Sports Director
kfranklin@ymcabr.org or 225-924-3606 ext 1414

www.ymcabr.org/sports