

# Ashland Optimist Basketball 2017/2018

## 5<sup>th</sup> and 6<sup>th</sup> Grade

Keep the top half of the form and return the bottom with payment. Forms are due by October 27<sup>th</sup>, 2017. Forms can be mailed to Ashland Optimist Club, ATTN: Basketball, P.O. Box 201, Ashland, MO 65010 or returned to the school office or City Hall by Friday, October 27<sup>th</sup>. Cost is \$55.00 per child. Family costs limited to two entry fees per family. Make checks payable to Ashland Optimist Club.

5th and 6th grade will be separated by gender, but age groups may be combined. The teams will play 5 on 5 with 10 foot baskets. Players of all skill levels are welcome. Emphasis will be on instruction and practice of the basic skills. Participants in this age group will play teams from other mid-Missouri towns.

Practices begin in November. Games can be scheduled December-February. Games are generally Saturdays but may be scheduled on other days. Games and practices will be held in the Primary & Middle School gymnasiums. Expect to be contacted by a coach after October 27th.

For questions or financial assistance contact Brandon Glascock at 424-2738 or [brandon.glascock@gmail.com](mailto:brandon.glascock@gmail.com).

Team signup information: Contact Colby Branch at 999 0500 or [colbybranchbball@gmail.com](mailto:colbybranchbball@gmail.com)

To register online go to:

<https://form.jotform.com/71626648472161>

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**Child's name:** \_\_\_\_\_ **Current grade:** 5<sup>th</sup> 6<sup>th</sup>

Child's shirt size (circle one) **Youth:** S M L **Adult:** S M L XL XXL **Gender:** Male Female

**Parent's names:** \_\_\_\_\_ **Cell phone:** \_\_\_\_\_

\_\_\_\_\_ **Cell phone:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Home phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

Willing to coach or assistant coach?

If yes, Name \_\_\_\_\_ **Shirt size:** S M L XL XXL XXXL

I acknowledge that basketball is a sport that requires physical exertion and has some risk of injury. I have no concerns about my child's ability to handle the level of activity necessary to play basketball. The child named above has my permission to participate in the Optimist basketball program.

Parent signature: \_\_\_\_\_

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