

# BLUEJAY BASKETBALL CLINIC

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

The Bondurant-Farrar Boys' basketball program is hosting a fall clinic for boys in 5<sup>th</sup> and 6<sup>th</sup> grade. The weeknight sessions will focus on passing, ball handling, shooting, and defensive fundamentals. This is a fundraiser for the 7-12 Boys Basketball Program and one that will benefit your son when he becomes a Varsity Basketball Player. In the past we have used the funds for camps, equipment, scouting needs and NEW UNIFORMS!

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

Tuesday, October 22nd, 3:30-5:00 (Middle School)  
Wednesday, October 23rd, 3:30-5:00 (Middle School)  
Thursday, October 24<sup>th</sup>, 3:30-5:00 (Middle School)

All clinic sessions will be held in the gym at the Middle School. We would ask that participants report to the gym after school and be picked up promptly at 5:00.

The Bluejay High School and Junior High coaching staff will lead all clinic sessions. Other volunteers including members of the high school team will assist them. **The cost of the clinic is \$50, which includes first-rate basketball instruction, and a Bluejay Basketball T-Shirt as well as many games!**

Please register at [www.bluejaynationsportscamps.com](http://www.bluejaynationsportscamps.com). Deadline is Monday October 21st.

Late registrations will be accepted, but T-shirts may not be available to late registrants until after the clinic.

**If paying by cash, you can submit form and payment to Coach Wiersma at Morris Elementary.**

Direct questions to Travis Evans @ [evanst@bfschools.org](mailto:evanst@bfschools.org) or 957-8191

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

Name \_\_\_\_\_ Parents/Guardians Names \_\_\_\_\_

Phone # \_\_\_\_\_ Grade \_\_\_\_\_ Email \_\_\_\_\_

Homeroom Teacher Name \_\_\_\_\_

Shirt Size (Circle One): Youth S (6/8) M (10/12) L (14/16) Adult S M L XL XXL

**To Program Director:** I hereby authorize the director and members of the Bondurant-Farrar Youth Basketball staff to act for me according to their best judgment in any emergency requiring medical attention and hereby waive and release the program of all liability for any illness or injury incurred by the above named participant while involved in the program.

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Parent or Guardian Signature