



2022 Grass Lake Boys Basketball Junior Warrior Program

Grades K – 6

- Five-week program running the week of October 24th through December 3rd (Off the week of Thanksgiving)
- Teams will be based on grade level participation and will have a 1-hour practice during the week in addition to a game on Saturday
- Games will be played as two 20-minute halves and will be October 29th, November 5th, 12th, 19th and December 5th
 - Practice dates/times will vary based on coach availability
- Coaches will be provided program drills and practice schedules that will develop key elements of our junior warrior's basketball skill and knowledge

Cost: \$60 includes:

- Camp Reversible Jersey
- Free Admission to all home Grass Lake Boys Basketball Games for participating Junior Warriors with paying adult (must wear Camp Jersey)
 - 5 structured practices and 5 games

TO REGISTER: Please fill out the section below and have your Junior Warrior bring the completed form to the Elementary/Middle School Office. Payment can be Cash or Check (Checks Payable to Grass Lake High School)

Junior Warrior Name: _____ Grade: _____
 Parent Name: _____ Phone: _____
 Address: _____ Email: _____
 Shirt Size: YS ___ YM ___ YL ___ AS ___ AM ___ AL ___

PARENT COACHES NEEDED: The Grass Lake Boys Basketball Program is built on the spirit of Family and that it takes us all to make this program all we want it to be for our community and our young athletes. With this, we will need PARENT COACHES for our Junior Warrior teams. If you are interested in being a parent coach for this year's program please indicate

_____ Yes, I would like to be a Parent Coach _____ Shirt Size

***All coaches will be provided with direct support for all questions, scheduling, and drills by the GL Basketball Program**

Parental Consent and Waiver Form

I, _____ herby appoint the staff of the Junior Warrior Basketball Program to authorize medical treatment for my child for any injury or illness that may develop during the program. I also, herby waive and release Grass Lake Community Schools and the program's staff from all liabilities due to injuries while in the program. I accept full financial responsibility for any medical treatment that may occur.

Parent/Guardian Signature: _____ Date: _____

For more information, please reach out to Coach McDaniel at Kylemcdaniel11@outlook.com. IT'S A GREAT DAY TO BE A WARIOR!!!!