



Kenny Goldman Basketball Summer League 2010

League Dates: July 5-August 19

- MHSAA referees
- Eight games and playoffs
- Age as of July 1, 2010
- Weekday evening practice and games
(Some Sunday games may be played)

Divisions

8U, 10U, 12U, 14U, 17U

Open: You bring in a team and coach

House: Register and we put players on teams

(Depending on numbers, house and open divisions may be combined.)

Registration and Cost Information

Early registration by June 28

\$100 for Center members/\$130 for non-members

\$130 for Center members/\$160 after July 28

Team fee: \$950 by June 28/\$1,250 after June 28

Jerseys are \$15 (you may use the jersey from 2008-2009)

All payments are final. **NO REFUNDS**, except in case of illness or injury with a physician's note (a \$25 processing fee will be applied). Absolutely no refunds for any reason after the third game.

For information, please call Bruce Wineman, 248.432.5498.

PLEASE COMPLETE REGISTRATION FORM ON BACK.



Please mail to:
The Jewish Community Center of Metropolitan Detroit
D. Dan & Betty Kahn Building
Eugene & Marcia Applebaum Jewish Community Campus
6600 W. Maple Road, West Bloomfield, MI 48322
www.jccdet.org



Summer 2010 Registration Form

Child's birthday ____/____/____ Height ____' ____"

Need jersey Jersey size: YM YL AS AM AL AXL AXXL Have from '09-'10 season

Is the player a Center member? Yes No Player's name _____

Parent's name _____

Address _____ City _____

State _____ ZIP _____ E-mail (mandatory) _____

Home phone _____ Business phone _____ Cell phone _____

6&U 8&U 10&U 12&U 14&U 17&U Grade _____

Join as a team (Open Division): Team coach name _____

Interest in coaching? _____

Please give preferred days for practice (not a guarantee) _____

One day you cannot practice _____

Early Registration Member **\$100** Non-member **\$130** **Regular Registration** Member **\$130** Non-member **\$160**

Jersey **Add \$15**

Total payment (Cash, check-made payable to the JCC, credit card) \$_____

Please review registration deadlines before totaling final costs.

Visa/MasterCard number _____ Expiration date ____/____

Name on card _____ CSC (3-digit number on back of card) _____

Signature _____

By registering/playing for the JCC Kenny Goldman Basketball League, you and your child agree to abide by our code of ethics.
Release and Indemnity: I, the parent and/or legal guardian, am fully aware of the risks inherent in the game of basketball. I will not hold the Jewish Community Center, its instructors, employees, associates or affiliates responsible or liable for any accidents that occur during this basketball program. I furthermore give my consent and authorize the Jewish Community Center to seek medical attention and treatment for my child in the event of an injury.

Signature of parent or guardian _____ Date ____/____/____