



WINS For Life

2015 Winter League

wins4life.com



WINS For Life provides a variety of educational services, including the WINS For Life All Stars AAU program, summer camps, 3 on 3 tournays, individual instruction, after school programs, coaching clinics, youth clinics, Basketball Hall of Fame events, professional development workshops, school events, and guest speakers.

Contact: Dave Vasquezna, wins4life@cox.net, 860-645-1934

League Benefits:

- * Six game (all teams play 6 games).
- * Equal / Fair playing time system. Schedule, standings, and rules posted online.
- * Improve over-all skills, increase basketball knowledge, have Fun!
- * Opportunity to play on the same team with friends. * Game shirt included.

Dates (Sunday's):

Clinic: 12/6 **Games:** 12/13, 12/20, 1/3, 1/10, 1/17, 1/24, (2/1: make-up date)

Sun., Dec. 6: "The Jump-ball Jamboree+

Skills Clinic & Team Selection: the Winter League season begins with a clinic for each age group. League Directors will balance the teams. The schedule for Dec. 6 will follow the weekly schedule outlined below.

Ages / Divisions / Schedule:

- * **30-minute practice followed by 1-hour game**
- * **Grades 6-8 (boys & girls): 10:00am-11:30am**
- * **Grades 4-5 (boys & girls): 12:00pm-1:30pm**

Host Site: Star Hill Family Athletic Center, 100 Gerber Drive, Tolland, CT. 06084

Register: Mail-in: form below **Online registration at:** starhillsports.com, *or* wins4life.com
(one form per student). List shirt size & teammate requests

Early Registration: (until 11/15), \$125 per student **Standard Registration:** (after 11/15), \$135 per student

2015-16 WINS For Life Basketball Winter League

contact: David Vasquezna **office:** (860) 645-1934 **email:** wins4life@cox.net **fax:** (860) 643-5172

Student Name: _____ **Parents Name(s):** _____

Birth Date: ___/___/___ **Age:** ___ **Grade (2015-16):** ___ **League:** boys 6-8: ___ boys 4-5: ___ girls 4-5: ___ girls 6-8: ___

Mail Address: _____ **Email:** _____

Home phone: _____ **cell #:** _____ ***Parent signature:** _____

***Parental signature (above) is required to enroll the student. **For Allergies or other medical conditions, please attach a note to this form.**

***With signature:** I agree to the following: I understand basketball has risk of personal injury. As parent/guardian to participating student, I agree to full responsibility (as does the student) for the personal health and safety of the student. I accept responsibility for all financial liabilities. To the best of my knowledge, the student is in good physical and mental condition, and does not have a condition that could be aggravated by participation, nor has a medical condition that could place others in harm's way. I agree to allow medical care, if needed. I agree to waiver, release, and hold harmless Star Hill Family Athletic Center, WINS For Life, LLC, WINS For Life coaches, and onsite staff. Each student is responsible for their personal property. Photos or video of students in WINS For Life leagues & activities may be taken only by WINS For Life staff for marketing use.

Standard fee: \$135 (after 11/15) Early fee: \$125 (until 11/15); Circle shirt size: Youth: S, M, L, **Adult:** S, M, L, XL,

Mail (checks made to): WINS For Life, P.O. Box 8396, Manchester, CT. 06042-8396

List preferred teammates: _____

