2024 TRI-COUNTY Freeze Hoops Elementary Basketball REGISTRATION

This is for all students grades K-6 interested in elementary basketball program

FREEZE HOOPS SIGN UP NIGHT for Grades K-6th on Monday, Oct 30th!! *Location: Karlstad School*

Time:6:30-7:30pm

How do I register??

Please fill out the Google Form Registration by Oct. 29th that is on the FREEZE HOOPS WEBSITE.

https://freezehoops218.wixsite.com/website/home

Be sure to click on your child's appropriate school & grade level and fill out the form. *(If can't do electronically please have child pick up form in the office at their school)*

PAYMENT is DUE on Freeze Hoops Sign Up Night Monday, Oct. 30th!!

CASH or CHECK ONLY!

Bring the correct fee amount to registration night OR send payment in a sealed envelope to your child's school and give it to the school secretary. *Put Attn: Jonathan Pearson, Freeze Hoops and your child's name on the envelope.*

PARTICIPATION FEES: \$50 (T-Shirts Included in fee)

Optional Shorts: \$25 If need a New Jersey: \$35 (grades 4-6th ONLY)

Only 3rd graders get a new jersey that is included with their \$50 fee. If lost or need a bigger size you will have to pay the \$35 fee.

Questions please contact Jonathan Pearson 218-689-2778 nsmi@wiktel.com

<u>PRACTICE INFO:</u> Practice schedule will be linked on the new FREEZE HOOPS WEBSITE. <u>http://freezehoops218.wixsite.com/website/home</u> Updates will be posted on the website and on the Freeze Hoops FB page. *Practice times are subject to change*.

COMMUNICATION: FREEZE HOOPS REMIND:

Download the "REMIND" app or go to remind.com K-2: remind.com/join/fhoopsk2 3-6th: remind.com/join/freezehoo FREEZE HOOPS FB PAGE: <u>https://www.facebook.com/mccfreezehoops</u> FREEZE HOOPS WEBSITE. http://freezehoops218.wixsite.com/website/home



TRI-COUNTY FREEZE ELEMENTARY HOOPS REGISTRATION FORM

Player's Name:	Circle One: Male Female
Circle Current Grade:	K 1^{st} 2^{nd} 3^{rd} 4^{th} 5^{th} 6^{th}
T-Shirt(included with fee):	YS, YM, YL, YXL, AdS, AdM, AdL, AXL
(FYI due to difficulty in shipping, sizes may be sized up if low in stock when we order)	
OPTIONAL SHORTS PURCHA	
Guardian #1	Guardian #2
Name:	Name:
Cell Phone:	Cell Phone:
E-mail Address:	E-mail Address:
PROGRAM AND ASSUME ALL RI HOOPS RESPONSIBLE. I CERTIFY THAT MY CHILD IS AE	R MY CHILD TO PARTICIPATE IN THE FREEZE HOOPS BASKETBALL SK ASSOCIATED WITH PARTICIPATION & AGREE NOT TO HOLD FREEZE EQUATELY COVERED BY INSURANCE. de by the Freeze Hoops Handbook/Rules. (See Handbook on Freeze Hoops (freezehoops218.wixsite.com)
Signature of Parent/Guardian:	
Please list any medical conditions your child has that the coaches need to be aware of.	
Please make checks payable to Freeze Hoops	
Registration Fee Grade	
Optional Shorts order: New Jersey if needed: Size: Current Jersey # Last Name:	\$35
(grades 4-6th only if lost o	r need bigger one)