

Mt. Lebanon Blue Devil Basketball Kickoff Basketball Clinic 1st thru 8th Grade Girls and Boys

WITH THE MT. LEBANON BASKETBALL ASSOCIATION AND THE
MT. LEBANON JV AND VARSITY BASKETBALL TEAMS !

Check it out! — www.mtlebanonbasketball.com — For more details!

LEARN KEY FUNDAMENTAL DRILLS & SKILLS

MLHS Gold Gym

MLHS South (Main) Gym

Boys and Girls
1st – 3rd Grade

4th – 8th Grade

Mon.	Oct. 19, 2009	6- 7:30 p.m.
Mon.	Oct. 26, 2009	6- 7:30 p.m.
Thur.	Nov. 5, 2009	6- 7:30 p.m.

<u>Girls</u>	<u>Boys</u>
6 - 7:30 p.m.	7:30 - 9 p.m.
6 - 7:30 p.m.	7:30 - 9 p.m.
6 - 7:30 p.m.	7:30 - 9 p.m.

- Dribbling
- Shooting
- Defense / Rebounding
- Passing
- Games

- Offensive Skills
- Defensive Skills
- Rebounding
- Ball Handling / Passing
- Games



Please respond ASAP, limited space available
\$40 per player (includes a Blue Devil t-shirt)

(Return this portion of form)

To Reserve Your Spot:

Make Checks Payable to:

Mail Form and Entry Fee to:

Mt. Lebanon Basketball Association

Mt. Lebanon Basketball Association

71 Longuevue Drive, Pittsburgh, PA 15228

Circle Pls>	Girl	Boy	
T-Shirt Size (circle one)			
Youth Small	Youth Medium	Youth Large	Youth XLarge
Adult Small	Adult Medium	Adult Large	Adult XLarge

Student Name (pls print neatly) _____

Grade _____

Street Address _____

Main Email Address _____

Alternate Email Address _____

Phone Number _____

Alternate Phone No _____

As the parent or legal guardian of the above student, I hereby generally waive, release, indemnity and hold harmless the Mt. Lebanon School District, its officers, directors, administrators, instructors, coaches, agents, representatives and/or assigns, or the like who are associated with the Clinic in any way, from any injury or liability whatsoever which may result from the student's participation in the Clinic. Further, I hereby affirm that the student is medically able to participate in the Clinic, without limitation. We understand and agree that Mt. Lebanon Basketball Association reserves the right to publish any photos taken of our participants at MLBA events.

Signature of Parent or Guardian _____

Date _____

Questions or need more information? Email Touscany@us.ibm.com or go to mtlebanonbasketball.com