

eneca Valley Boys Basketball Elementary Programs

These Programs are for boys who are currently in grades 3rd through 6th.

FALL PROGRAM

The Fall program will focus on skill development, fundamentals, and scrimmaging.

Dates: 10/3, 10/10, 10/17 & 10/24

Times: 6pm - 7:30pm

3rd & 4th Grade Location:

• Ryan Glover Middle School

5th & 6th Grade Location:

- 10/3 Intermediate HS
- All other dates Senior HS

What to Bring/Wear: a basketball, water bottle, sneakers, and athletic clothes

Cost: \$80

IN HOUSE PROGRAM

The In-House program is a for boys who want to improve their skills without being in a highly competitive atmosphere.

Practices: Weekdays, 1 time per week, in SV gyms. Times and schools to be determined.

Games: Eight game schedule played on weekdays and Saturdays. Times and schools to be determined.

Program Length: November - February

Evaluation times & locations below:

Evaluation purpose is to balance team rosters for the league.

3rd & 4th Grade Evaluations:

• Tues, Nov 14th 6pm – 7pm – SHS

5th & 6th Grade Evaluations:

• Tues, Nov 14th 7pm – 8pm – SHS

Rosters, game schedules and practice schedules will be posted at www.svraidersboysbasketball.com.

Cost: \$105

TRAVEL PROGRAM

The Travel Program is for boys interested in competing at a higher level. Tryouts are required. Those who do not make the travel team will be placed into the In-House League.

Practice: 1 - 3 times a week

Games: Weekdays & Saturdays

Tryout times & locations

3rd & 4th Grade Team Tryouts:

- Thurs, Nov 2nd 6pm 7pm SHS
- Tues, Nov 7th 6pm 7pm SHS

5th Grade Team Tryouts:

- Thurs, Nov 2nd 7pm 8pm SHS
- Tues, Nov 7th 7pm 8pm SHS

6th Grade Team Tryouts:

- Thurs, Nov 2nd 8pm 9pm SHS
- Tues, Nov 7th 8pm 9pm SHS

Rosters will be posted at

www.svraidersboysbasketball.com.

Cost: \$150*

*Travel team players will incur additional team fees.

Please return the registration form below and your check payable to "SVBBB" to Kevin Trost at 468 Crescent Blvd Ext, Crescent, PA 15046. Please pre-register prior to tryouts/evaluations. Any Questions, please contact Head Coach, Kevin Trost at Kevin352@verizon.net

Please complete the information below and mail in with payment.				
Players Name:	Gra	de: Ci	rcle Jersey Size:	YS, YM, YL, AS, AM, AL, XL
Parent/Guardian	Phone:		Email:	
Check the program(s) you are registering for:	☐ Fall (\$80) ☐	In House (\$105)	☐ Travel (\$*	150)
☐ YES I will coach a team – Coach's Name:				
Parent(s)/Guardian(s) Release Form "This is not a Seneca Valley School District sponsored program"				
I hereby approve of my son's attendance and participation in the Seneca Valley Boys' Basketball Elementary Program. I certify that he is in good health and able to participate in all activities. If you are unable to reach me, I authorize the directors to act on my behalf according to their best judgment in any emergency requiring medical attention for which service I will pay. I hereby waive and forever release Seneca Valley Boys' Basketball Boosters, its officers, and the basketball staff from all liability for any injuries or illnesses incurred while in the program. Please attach a note explaining any physical limitations, medical conditions, and/or required medication.				
Parent/Guardian Signature				Date