Columbus Grove Bulldogs

St. Anthony Falcons

5th/6th Grade Boys Basketball Tryouts

Practice in HS Gym
Nov. 4th, 9-11am

Tryouts in HS Gym
Nov. 11th, 9-11am

Parent Meeting
November 4th at 9am

Team Cost: $40/player

Please fill out and bring the bottom of this paper to practice on November 4.

Dear Parent/Guardian,

This year, we are doing our 5th/6th grade basketball program differently than years past. Our goal is to combine CG and SA to have two teams at each grade level, an A and a B team, with no more than 10 players on each team. The teams will be determined by tryouts. The A team will consist of the players receiving the highest evaluation scores and will play in a league at Bath beginning in January. The B team will play in the CYO league beginning in December. We feel this will allow the players and teams to develop and grow at their own rate.

We will have a practice on November 4 from 9-11 am to show players what we are looking for and give them an opportunity to play. We will have a brief 5-10 minute parent meeting at the start of practice. Players will have a week to work on their game. Tryouts are November 11 from 9-11am. Coaches will evaluate and score each player. The players receiving the highest scores (no more than 10) will play on the A team. The next 10 will play on the B team. Both teams will have a fundamentals and skills practice on Saturday mornings from 7:30-9am. We encourage any player who does not make one of the teams to come to these practices and work to improve his skills. The teams will also practice at least once a week in the evenings. The cost to be on either team is $40/player. This will cover league fees and jersey cost. No money is due until after tryouts and the teams are set. If you have any questions, please feel free to contact me at cg_sautter@cg.noacsc.org.

Name: _____ Grade: _____ Teacher: _____

Parent/Guardian: _____ Phone #: _____

Emergency Contact: _____ Phone #: _____

Are you interested in coaching? ☐NO ☐YES If yes, who? _____

I, _____, hereby waive the Columbus Grove Athletic Department and staff of any responsibility in the event of personal injury to my son, _____, during the 5th/6th grade basketball program.

_____

(parent/guardian signature)

The above signed is a legal parent or guardian and recognizes all responsibility for any minor participating in this program.