Wilmot Boys High School Summer Basketball 2022

Player Name	 	Grade ('22-'23 year)			
T-shirt Size (circle) AS					

The summer basketball season is open to incoming Freshmen through Senior boys. The season will consist of camps, workouts, and leagues/tournaments that focus on player and team development. Offensive fundamentals along with familiarization of team concepts will be emphasized.

Cost for the summer is \$100 and this covers all events. Checks can be made payable to *Wilmot High School*.

On-line Registration: \$100 plus \$2 processing fee Community Outreach Class Registration

High School Camps/Workouts

Shooting Camp 6/17

(8:30-11:30 am)

Wilmot Camp 6/20 (1-3 pm) - 6/21 (1-3 pm) - 6/23 (1-3 pm) - 6/24 (8:30-10:30 am)

Workouts/Games June 27 – June 28 – July 7 – July 12 – July 14 – July 19 – July 21

(All workout sessions are 1:00-2:30 pm)

Leagues/Tournaments

Varsity

League at Badger HS 6/15 (5 and 6 pm) - 6/22 (5 and 6 pm) - 6/29 (5 and 6 pm) - 7/6 (TBD) - 7/13 (TBD) - 7/20 (TBD)

Wisconsin Basketball Yearbook Tournament at Burlington HS 7/1 - 7/2

JV2 (Times TBD)

League at Elkhorn HS

Wilmot High School Community Outreach Waiver Form Attention Community Outreach: 11112-308th Avenue, Wilmot WI 53192

Phone: 262-862-2351 Ext 318 Fax: 262-862-6929

Please complete a separate form for each participant.

Participant's Name			Birthdate		
				(Required	for Yout
Address	City		Zip_		
	,				
Day Phone:	Evening Phone	Ce	II:		_
Adult's e-mail		Gender:	Male	Female	
			1		
Course Title	Dates	Time	Fee		
					•
		- 1.1			
		- 11	_ \		
			-		
		_		~	
Make checks payable to: Wilmot H <mark>igh S</mark>	chool				
Liability Waiver I, (or as Parent/Guardian of my child's/children's) participation in these Cactivities. I hereby waive, release, absolve, inchigh School District, their officials, supervisor child's/ children's) participation. I understand Outreach Program sponsored program, activi	ommunity Education program demnify and agree to hold had so to hold anyti that this waiver is valid anyti	ns and camps incl rmless the Comm o any claims and me I (or my child	uding transpo nunity Outreac damages as a /children) part	rtation to and fro h Program, Wiln result of my (and icipate in a Com	om these not Union d/or my
Occasionally participants will be photographe promotion please notify the Community Outr		notional purpose	s. If you do no	t wish to be incl	uded in th
Parent/Guardian/ Participant Signature					
Register by Mail or Walk-In: Mail or drop off your registration form w Wilmot Union High School Attention: Community Outreach PO Box 8 11112-308th Avenue Wilmot, WI 53192-0008	ith cash or check payment t	to:			