

2014 MIAMI VALLEY RISING STARS

SUMMER BASKETBALL LEAGUE

HOSTED BY THE KETTERING FAIRMONT BOYS BASKETBALL COACHING STAFF

LEAGUE INFORMATION

Coach Blair Albright is excited to announce the <u>1st Annual 2014 Miami Valley Rising Stars</u> <u>Summer Basketball League.</u> This league is open to any boy entering grades 5, 6, 7 or 8 in the fall of 2014 and will give each player an opportunity to develop his skills amongst other players from across the city of Dayton and its surrounding areas.

Teams will be comprised of players from various communities giving all a chance to compete with other boys from various school districts rather than playing alongside only those from a specific school or community. There will be two divisions. All Rising 5th and 6th graders will play together in the NCAA Division while all Rising 7th and 8th graders will play together in the NBA Division.

With the exception of one organization/practice night, the league consists of games only. The league tuition includes at least 8 games and a reversible uniform. Additionally, all players can expect to play a minimum of 50% of all games giving each an opportunity to develop his skills.

HIGHLIGHTS			
When:	Tuesday & Thursday Nights From June 17th to July 24th Games scheduled between 4-8 p.m.		
Where:	Trent Arena and the facilities at Kettering Fairmont High School		
Cost:	\$125 per player, checks payable to <u>Firebirds Basketball, LLC</u>		
Contact	: Coach Blair Albright (614) 288-3459 blair.albright@ketteringschools.org		
Next:	Once your registration is received, further details will be emailed.		
Highlights:			
00			
* Post Season Awards Champions/All-Stars			
* Opp * Fun	and positive environment for growth		
Please send payment and registration by <u>May 31st</u> to:			
-	Coach Blair Albright		
门相	3301 Shroyer Road Kettering, OH 45429		
	Where: Cost: Contact Next: Highligh * Lea * Lea * Pos * Opp		

Detach here———

I give my consent & approval for the participation of my child in the Miami Valley Rising Stars Summer Basketball League. I certify that he is physically fit to take part. I will not hold the coaching staff responsible in case of accident or illness.

Pare	nt/ Guardian Signature	Date	_ Primary Phone	Alternat	e Phone		
Parent Guardian Name (Print): In case of emergency, please transport to (Hospital)							
Emergency Contact Person Primary Phone		Relationship					
Player information							
Nam	e : First	_Last	School:		Grade for 2014-15 School Year		
Heig	nt: Weight:	Jersey Size (Circle One) YL	SML XL	Shorts Size (Circle One)	YLSMLXL		
*Size accuracy is important as we may not be able to make size adjustments.							
Address (include City and Zip)							
Email Address (please print clearly):							
				CAR POOL REQUEST: These will be considered, to the best of our ability, but cannot be guaranteed.			
Please circle the statement below that <u>best</u> describes the registered player's ability:							
1.	1. First experience with competitive basketball.						
2.	Has played before, but skill level is avera	age to below average compared t					
3.	Has notable experience and is average t	o above average compared to otl					
4. Has significant experience and is often among top players in grade.							

5. Very experienced and often best player on team or has played against older boys.