



Rushcliffe Whiz Kidz 2015-16 Mini Basketball Programme Application



Start Date: Wednesday 9 September 2015
End Date: Wednesday 15 June 2016

Venue: Jesse Gray School, Musters Road, West Bridgford, Nottingham, NG2 7DD
School Year: 2, 3, 4, 5 - **Session 1: Wednesdays 6.30-7.30pm**
School Year: 6, 7 - **Session 2: Wednesdays 7.30-8.30pm**

Club Description: Rushcliffe Whiz Kidz were founded in 1997 by Coaching Director Jimmy "Jumpshot" Smith. **Coach Smith, the author of *Running With The Greyhounds, A Century of Loyola Maryland Basketball History*, will be celebrating his 40th season in the UK.** Whiz Kidz is a family friendly mini-basketball club for boys and girls of all abilities from ages 6 -12 (School Years 2 through 7). Players receive instruction in fundamental skills, sportsmanship, team play and learn to compete in our monthly intra-club league-"NBA Night", progressing to Notts. League competition and our older sections of Jets and Lady Jets.

2015-16 Membership Offers: Guest Fee £3.00

Offer 1: Full season (34 weeks not inc. Half terms)=£68.00

Offer 2: Sept-Dec 2015= £35.00

Offer 3:Sept2015- March2016= £55.00

Make Cheque Payable To: **Rushcliffe Basketball Club**

Send To: Rushcliffe Basketball Club c/o Jimmy Smith, 77 Valmont Rd., Bramcote, Nottingham, NG9 3JD
Telephone/email Enquiries To: Coach Jimmy Smith: jimmy-jumpshot@hotmail.com
m. 07804386795

Player's name: _____ Date of birth:..... School Year:.....

Address: _____

Email: _____ Tel: _____

Contact's relationship to player: _____ School: _____

Relevant medical information: _____

Consent from Parent/Guardian

My child is in good health and I consider him/her capable of taking part in the event. I consent that in the event of any accident, any necessary treatment can be administered to my child, which may include the use of anaesthetics. I also understand that while coaches will take every precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss, damage or injury suffered to my child.

Parent/Guardian name: _____

Signature of Parent/Guardian: _____ **Photography:** I am aware that

photographs and video footage may be taken during this event for promotional purposes. I give consent for my child to features in such photos. Photos will be used for 2 years. If your decision changes call: 01159392819 Signature of

Parent/Guardian: _____ The use of flashlight photography will not cause

problems for my child. (Please tick box)