

SUMMER 2019  
**WESTHILL WARRIORS**  
**BOYS BASKETBALL SKILLS CLINIC**  
W/ COACH CONNELLY



BREAKDOWN SKILL STATIONS EVERY MONDAY & TUESDAYS  
WITH ROUND ROBIN STYLE 3 ON 3 TOURNAMENTS EVERY WEDNESDAY

**JULY 15-17**

GRADES K-4 9-10:30AM  
GRADES 5-8 10:30-NOON  
GRADES 9-12 NOON-1:30

**JULY 22-24**

GRADES K-4 9-10:30AM  
GRADES 5-10 10:30-NOON  
(NOTICE ADJUSTMENT DUE TO  
GIRLS PROGRAM AT NOON)

**JULY 29-31**

GRADES K-4 9-10:30AM  
GRADES 5-8 10:30-NOON  
GRADES 9-12 NOON-1:30

**AUGUST 5-7**

GRADES K-4 9-10:30AM  
GRADES 5-8 10:30-NOON  
GRADES 9-12 NOON-1:30



LOCATION: CHERRY ROAD ELEMENTARY (ALL 4 WEEKS)

----- (CUT HERE) -----

**\*\*\* WESTHILL BASKETBALL SUMMER SKILLS CLINIC SIGN-UP SHEET \*\*\***

**NAME:** \_\_\_\_\_ **GRADE:** \_\_\_\_\_ (ENTERING 2019 SCHOOL YEAR)  
**ADDRESS:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**PARENT/GUARDIAN CONTACT:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**CLINIC SIGN-UP: \$45/WEEK (MAKE CHECKS PAYABLE TO WESTHILL BOOSTER CLUB)**

PLEASE CIRCLE APPROPRIATE WEEK(S) YOU WOULD LIKE TO SIGN UP FOR, AS MANY AS FOUR WEEKS AVAILABLE!

**JULY 15-17                      JULY 22-24                      JULY 29-31                      AUGUST 5-7**

TOTAL PAID: \_\_\_\_\_

I GIVE PERMISSION FOR MY SON TO PARTICIPATE IN THE BASKETBALL SKILLS TRAINING. I WAIVE AND RELEASE THE SKILLS CLINIC AND THE WESTHILL SCHOOL DISTRICT FROM ANY AND ALL LIABILITY FROM ANY INJURY OR ILLNESS INCURRED AT THIS EVENT.

**PARENT SIGNATURE:** \_\_\_\_\_ **EMERGENCY CONTACT & #:** \_\_\_\_\_



TURN IN BOTTOM SIGN-UP SECTION TO:  
JON CONNELLY – 110 ROSITA STREET – SYRACUSE, NY 13219 – 315-657-8781 – [JAYSEE30@YAHOO.COM](mailto:JAYSEE30@YAHOO.COM)