

HOOP 10 Basketball Sunday Clinics

Court Time
6205 SW 34th
Amarillo, Texas



January 8, 15, 22 and 29
February 5, 12, 19 and 26

3:00 – 5:00 p.m.

Players of All Ages

Walk-up registration at the door – 2:45 p.m. each Sunday

Sunday Clinics prepare players for spring tryouts and the AAU season providing agility and speed training, offensive skills and defensive footwork drills. Agility and Speed Training is intense speed and agility work to improve strength, power, flexibility and stability. Offensive Skills include ball handling, shooting form, offensive moves and position work for both guards and post players. Defensive Footwork incorporates on ball and deny defense, boxing out and rebounding. The cost for each Sunday Clinic is \$20. For more information call Coach Johnna Pointer @ 806-681-0331 or visit www.hoop10.com.

HOOP 10 Basketball Sunday Clinics Registration

Name _____ Grade _____

Address _____
P. O. Box or Street City State Zip

Telephone _____ Email _____

I, as parent or guardian, of the above named child, hereby grant permission for him/her to participate in HOOP 10 Basketball Sunday Clinics and acknowledge the fact that he/she is physically able to participate. I acknowledge that basketball or any other sport or physical activity can be dangerous and that participation could lead to bodily injury or death. In consideration of participation in HOOP 10 Basketball Sunday Clinics, I HEREBY ASSUME THE RISK OF THE ABOVE NAMED CHILD PARTICIPATING and accept full responsibility to pay expenses for medical care that may arise from said participation. I hereby release HOOP 10 Basketball LLC and its employees and J's Gym Inc (COURT TIME), 6205 SW 34th, Amarillo, TX and its employees from all claims or illnesses which may be sustained by my child and authorize the director or designee to select hospital facilities and/or physician of choice and authorize treatment of the above named player on an emergency basis in the event such treatment becomes necessary while participating in HOOP 10 Basketball Sunday Clinics. HOOP 10 will not be responsible for loss or theft of money or personal articles.

Parent or Guardian Signature _____

Date _____