



2017-2018 SPRAGUE HOOPS JUNIOR OLYS

Philosophy

To provide student athletes the opportunity to develop skills and athleticism, learn high school systems/terminology, and cohesiveness with players that will attend the same high school

Cost

\$225 once teams are formed . Evaluation tryouts are free . Payment options , scholarships, and fundraisers will be made available to help off set costs for players that cannot afford



Boys 5th-8th Grade Evaluation/Tryouts

Where: Sprague High School

When: Monday November 6th

7th Grade Boys 6p-7p

5th/6th Grade Boys 7p-8p

8th Grade Boys 8p-9p

Wednesday November 8th

7th Grade Boys 6p-7p

5th/6th Grade Boys 7p-8p

8th Grade Boys 8p-9p



Interested in Coaching ?

We are recruiting coaches to coach at each grade level. If you are interested in coaching please contact:

Jason Beyrouty (Director of Junior Olys)

jmb@beyrouty.com

Questions????

Contact-Director Jason Beyrouty

at 503-910-5653 or email at

jmb@beyrouty.com

Future Oly team Include...

1. 2 practices (minimum) a week beginning in November (using Sprague HS & Other gym facilities in South Salem
2. 5 tournaments with 4 game guarantees (opportunity to add more tournaments on as well)
3. Full Uniform jersey and shorts
4. Trained Coaches teaching fundamentals and terminology of the high school
5. Each feeder program is involved with the High School Sprague Hoops Program

Junior Oly Player Pre Registration Form

Participation in tryouts is free. Mail completed form prior to tryout date to Sprague High School 2373 Kuebler Blvd. S Salem, OR 97302 Attn Attn: Steve Masten Registrations will also be accepted at the door of their first tryout date

First Name: _____ Last Name: _____ Grade: _____ Date of Birth: _____ Gender: _____ School: _____

Primary Guardian: _____ Emergency Contact #: _____ Email Address: _____

Authorization Agreement

I personally assume all risks associated with my child's participation in the program/event presented by the Junior Oly program, including but not limited to: use of facilities and all hazards from participation in the program/event. I hereby release for myself, my child (children), and his/her heirs, executors and administrators, Sprague High School, all sponsors and co-sponsors of the program/event, their officers, agents, and volunteers, from any and all claims, demands, action or causes of action incident to my child's participation in the program/event. I grant permission to all of the foregoing to use any photographs, motion pictures, video recordings, or any other record of this program/event for any purposes.

I authorize the Junior Oly Program, Sprague High School, and its representatives to secure the services of a physician or hospital, and to incur expenses for necessary services in the event of accident or illness, and I will program payments for these. Every reasonable effort will be made to reach the parent(s) as soon as possible. The program is designed for the enjoyment and benefit for ALL students. Should disciplinary problems occur, parent/guardian will be contacted to pick up the student. My signature indicates that I have read and understand the instructions and information on this form.

Parent Guardian (print): _____ Signature _____ Date: _____