



**TAKE CHARGE HOOPS
SUMMER BASKETBALL CLINIC**

(TEMPORARY RELOCATION TO NORTH HIGH SCHOOL, WORCESTER)
(EASILY ACCESSIBLE FROM HAMILTON ST, OR PLANTATION ST)

The Shrewsbury High School Boys Varsity Basketball Coaches, Adrian Machado, Gerry Nowosacki will be sponsoring a 4 FULL-day basketball clinic. The focus will be on individual skills through the use of time oriented drill stations. Temporary relocation from Shrewsbury H.S. due to Summer Rehab of the complete gym facility.

*** THE PROGRAM IS FOR BOYS AND GIRLS IN GRADES 3rd THROUGH 12**

Where: North High School, 140 Harrington Way, Worcester, MA

When: Monday thru Thursday; (6/27/2016 - 6/30/2016)

Time: Daily sessions will run from 9:00 AM sign in to 3 PM

Cost: Total cost of the program will be \$150

Our Philosophy: *“Good competitive skills influence values for a good student athlete, and hard work promotes success.”*

The clinic will be conducted using groups based on grade level and gender where appropriate. **Coaches Machado and Nowosacki** will coordinate all activities with the support and assistance of **former players and High School coaches that have distinguished themselves in our Communities.** It is with their expertise and experience that instruction and guidance will be provided.

The daily routine will consist of:

- ➔ **Warm up techniques and conditioning**
- ➔ **Drill stations for skill development**
- ➔ **Group instruction and demonstrations for individual and team strategies**

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NAME: _____ **M** ___ **F** ___ **AGE:** _____ **GRADE:** _____

ADDRESS: _____ **TELEPHONE:** _____ **E-Mail:** _____

I, Parent/Guardian agree by enrolling my son/daughter that he/she is physically and mentally able to participate in all of the clinic activities. In case of a medical emergency and I cannot be reached, I hereby give permission to the staff to pursue emergency medical services to secure appropriate medical treatment for my child. I understand that my medical insurance is expected to cover my child for injuries.

Name of your Medical Insurance Company: _____

Signed: _____ **Date:** _____
Parent/guardian

TUITION: \$ 150.00 (\$ 10.00 reduced rate for siblings)
Mail checks to: TAKE CHARGE HOOPS
21 Shepard Lane
Shrewsbury, MA. 01545

CHECKS PAYABLE TO: TAKE CHARGE HOOPS
Questions? Contact
Gerry Nowosacki
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