



**SMBA  
Winter 2015 (Grades 4-8)**

**Yes! I am interested in SMBA basketball this winter!**

**\*Please return forms to Mr. Kern by November 3rd.**

**Player Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

Please send team emails to these email addresses:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Possible injuries or conditions that might inhibit activity:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Allergies, asthma, inhaler use:**

**My child will have an inhaler with him/her.**

\_\_\_\_\_

**Known regular schedule conflicts during the season:**

Mondays: \_\_\_\_\_

Tuesdays: \_\_\_\_\_

Wednesdays: \_\_\_\_\_

Thursdays: \_\_\_\_\_

Fridays: \_\_\_\_\_

Saturdays: Games played on Saturday mornings

Sundays: \_\_\_\_\_

\*\*\* While we try to accommodate everyone's schedules, practice times vary depending on the coach's availability.

\*\*\* All players will be placed on a team.

\*\*\* **Practice will begin the week of November 15th**