

## Harvard Community Education

39 Massachusetts Avenue  
Harvard, MA 01451  
978-456-4118  
jcavanaugh@psharvard.org

### FEATURES

- Instruction in basketball fundamentals by our teaching staff. Our low player/coach ratio ensures maximum staff attention. Individual help is consistently available.
- Players are grouped by age and playing experience.
- Skill stations each day emphasize fundamentals needed to succeed in basketball. Special focus is given to improving shooting skills.
- Students registered by May 25 receive a Harvard Hoops t-shirt.
- An ice cream/popsicle treat is provided each day.

Use this form or register online at:

[www.psharvard.org](http://www.psharvard.org) - Departments—Community Education—Summer Spectrum

**T-shirts are ordered for students registered by May 25, 2018**



### Emphasis On FUN and Improvement

Harvard Community Education is proud to present Harvard Hoops! Basketball. We cater to basketball abilities of all levels, from the beginning to the advanced player. The staff looks forward to presenting an action-filled week of basketball for all participants. We will focus on learning and improving the fundamentals of basketball while having a great time. Age appropriate equipment will be used to ensure that all players develop good habits as they practice their basic skills.

**Coach Alexa Cavanaugh, B.A., M.Ed.** graduated from Bromfield in 2006 where she played on the Varsity Basketball team. She received her B.A. from Franklin Pierce University, her M.Ed. from Fitchburg State University. She has coached the Bromfield Girls Middle School Basketball as well as many Spectrum Basketball programs.



# HARVARD HOOPS!

June 25-29, 2018



## JUNIOR LEVEL

Grades 1-4

*(grade level in the Fall  
2018)*

9 a.m.-Noon

**Coach  
Alexa Cavanaugh**

**JUNE 25-29, 2018**

*Register by May 25  
And receive a Hoops t-shirt!*

*Register by  
May 25 - \$139/session*

*Register after  
May 25 - \$149/session*

2

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1

8



## HARVARD HOOPS BASKETBALL 2018

### Necessities for the Week

Each player should wear gym shorts, t-shirt, sweat socks, and sneakers/basketball shoes. Please be sure that your child has broken in his/her sneakers. Each participant should bring a water bottle, be sure to label it with your child's name!

A popsicle treat will be available at the end of each day!

### Important Information



The staff at Harvard Hoops! pride themselves on providing participants with a safe and enjoyable environment. **However, basketball is a contact sport.** HARVARD HOOPS!, SPECTRUM, and the Harvard Public Schools are not responsible for injuries incurred by players or for any articles lost during the program.

### Refund Policy:

No refunds or credits will be issued. Checks will be returned only if a class is cancelled.

Please know that it is the policy of the Harvard Public Schools not to discriminate on the basis of race, color, sex, gender identity, religion, national origin, age, disability, or sexual orientation in its educational programs, activities or employment policies as required by Title IX of the 1972 Educational Amendments, Chapter 199, and Section 504 of the Rehabilitation Act of 1973. The district compliance coordinator is Marie Harrington, Director of Pupil Services, 978-456-4143.

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Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade in September 2018: 1 2 3 4

Allergies: \_\_\_\_\_

Home Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Parent Cell Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Parent(s)/Guardian(s): \_\_\_\_\_

Emergency Contact & Phone: \_\_\_\_\_

Physician: \_\_\_\_\_ Physician Phone: \_\_\_\_\_

Medical Plan and Number: \_\_\_\_\_

***T-shirts are ordered for students registered by May 25, 2018***

T-shirt Size

Please Circle one: *Child Medium Youth Large Adult Sizes: Small Medium Large X-Large*

**June 25-June 29, 2018**

**Tuition: \$139 if registered by May 25**

**9:00 a.m.—Noon**

**\$149 if registered after May 25**

**Check payable to: *Town of Harvard***

I, the undersigned, attest that I am the parent/guardian of the child named on this registration form who will attend the Community Education/ SPECTRUM program, HARVARD HOOPS!, and allow him/her to participate. I agree to indemnify and hold harmless the staff, administrators, and official assistants and to absolve them from any and all liability arising from my child's participation in this activity. I authorize the directors of HARVARD HOOPS! To act for me according to their judgment in any emergency requiring medical care and attention to the minor listed on this form.

I have read and am fully aware of the Refund Policy of Harvard Community Education and the SPECTRUM program.

Signature of Parent/Guardian

Date