

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.
- Games are played each day, 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.
- Each player receives a camp t-shirt** (if registered by June 9),
- An ice cream/popsicle treat is provided each day.
- **Bring your lunch Monday-Thursday, pizza will be provided on Friday.**

****T-shirts are ordered early, for those students who register by June 8, 2018**



Emphasis on Fun and Improvement

The staff at Harvard Hoops is proud to present an exciting week of basketball for boys and girls who will be in the fifth through eighth grades in Fall of 2018. We cater to basketball abilities of all levels, from the beginning to the advance player. The staff looks forward to presenting an action-filled week of basketball for all participants. We will focus on improving the fundamentals of basketball, and the importance of playing as a team while having a great time.

Director Tom Hill is a former Bromfield teacher and coached the Bromfield Varsity Basketball teams for many years. Coach Hill had several players reach the 1000 point club during their Bromfield Basketball career as well as teams that won the District finals and reached the state playoff level. Tom was voted Coach of the year in both 1999 and 2002. He was elected into the MCBA Coaches Hall of Fame in 2013.

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.

HARVARD HOOPS!



SENIOR LEVEL

for
students entering
Grades 5-8
Fall 2018

JULY 9-13
9:00 a.m.-3:00 p.m.
(Pizza on Friday!)

Register by
June 8—\$220

Register after
June 8—\$235

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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 basketball shoes are broken in. Each participant should bring a water bottle, labeled with your name!

Important Information



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

Cancellation Policy:

Tuition is non-refundable. Checks will be returned only if a class is cancelled.

Note: Coaching staff may be subject to changes/substitutions



Name: _____ Age: _____

Grade in September 2018: 5 6 7 8 School: _____

Home Address: _____

Home Phone: _____ Parent Cell Phone _____

E-mail _____

Parent(s)/Guardian(s): _____

Emergency Contact & Phone: _____

Physician: _____ Physician Phone: _____

Medical Plan and Number: _____

Allergies: _____

T-shirt Size (Note: T-shirts are ordered in advance for students **registered by June 8**)

Please Circle one:

Adult Sizes: *Small* *Medium* *Large* *X-Large*

July 9-13, 2018
9:00 a.m.—3:00 p.m.

Tuition: \$220 if registered by June 8, 2018
\$235 if registered after June 8, 2018

I, the undersigned, attest that I am the parent/guardian of the child named on this registration form who will attend the 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