

**Blue Devils Youth Basketball**  
**Boys Skill Development/Winter League**



**Grades 1<sup>st</sup> – 8<sup>th</sup>**

**8-week program (6 games, 1 scrimmage, no weekday practice)**

- Week 1 will be all skill development and evaluation
- Saturdays beginning January 4<sup>th</sup> (Grades 3<sup>rd</sup>-8<sup>th</sup>)
- 1<sup>st</sup> and 2<sup>nd</sup> grade division will play 8 straight Wednesday evenings beginning January 8<sup>th</sup>
- Location: Brunswick High School (Grades 3<sup>rd</sup>-8<sup>th</sup>)  
Towslee Elementary (Grades 1<sup>st</sup> and 2<sup>nd</sup>)
- Cost \$65 (**Deadline, December 30<sup>th</sup>**)
- Call Joe Mackey after the deadline for registration

There will be 20-minute skill sessions prior to each game.

**First and second grade division** will focus more on skill and fundamental development. Games will be shorter and hoops will be lowered.

**Camp Director: Joe Mackey (Boys Varsity Basketball Coach)**

For more information, contact Joe Mackey :

[jmackey@bcsoh.org](mailto:jmackey@bcsoh.org), 330-241-9800

**See back for registration information**

**Blue Devils Winter League Registration**

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Cell Number: \_\_\_\_\_ Email: \_\_\_\_\_

Check the appropriate box:

\_\_\_ 1<sup>st</sup> and 2<sup>nd</sup> grade (Wednesday) \_\_\_ 3<sup>rd</sup> and 4<sup>th</sup> grade

\_\_\_ 5<sup>th</sup> and 6<sup>th</sup> grade \_\_\_ 7<sup>th</sup> and 8<sup>th</sup> grade

**Please circle t-shirt size:**

Youth Small, Youth Medium, Youth Large

Adult Small, Adult Medium, Adult large, adult XL

Preferred Jersey Number: \_\_\_\_\_ (list at least three)

By my signature I attest that my son is able to participate in the program indicated. I have full knowledge of the risks involved. In consideration for acceptance of this registration, I waive any and right and claims for damages against Brunswick City Schools, Blue Devils Youth Basketball, or its staff and will hold them harmless for any and all injuries incurred.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Mail registration and check payable to BYB to:

Joe Mackey  
3581 Center Road  
Brunswick, Ohio 44212