

**Classics AAU Basketball  
Friday Night Hoops Clinic Registration Form 2019-20**

Friday Night Hoops is a non-team, open session and is ideal for younger athletes including 1st-5th graders and for other players in these grades who may not make or be able to commit to one of the Classics AAU club teams and wish to work on improving their fundamentals. These clinics are designed to improve skill levels, build a foundation and keep you in the basketball mix. We will focus on dribbling, passing, shooting and defensive techniques along with team drills and team play. It is very important to remember the more you practice, the better player you become. You should expect to improve your fundamental skills and learn team-work skills. We hope to be able to form competitive teams out of the participants or refer them to our current AAU Club teams and coaches to further growth and development.

**Sessions are Fridays 630-830pm and run through the winter of the 2019-20 as follows:**

**Dec 6 through Mar 27 (except 12/27) - Twinbrook Elementary, 5911 Ridgeway Ave, Rockville, Md 20851**

**Player costs are either for seasonal package or number of sessions and include an AAU membership.**

**16 Sessions for Winter Series - Dec 6, 13, 20, Jan 3,10, 17, 24, 31; Feb 7, 14,, 21, 28; Mar 6, 13, 20, 27**

**Drop in fee - Classics team members/younger siblings of team members \$15; non team \$25**

**5 sessions - \$65; \$105**

**10 sessions - \$120; \$190**

**All 16 sessions - \$165; \$275**

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**Friday Night Hoops Clinics Registration Form  
PLEASE PRINT AND BRING TO FIRST SESSION ATTENDED**

**Sessions (Please Circle):**      5,            10,            16      **Drop-In (Date:\_\_\_\_\_)**

**Classics Player Team (if applicable):**\_\_\_\_\_

**Payment (circle one):** Cash, Check, or Money Order.      **Amount: \$**\_\_\_\_\_

**Child's Name:**\_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Grade:** \_\_\_\_\_(as of 12/1/2019)

**Mother's Name:**\_\_\_\_\_ **Father's Name:**\_\_\_\_\_

**Child's Home Address:**\_\_\_\_\_

**City, State, Zip Code:**\_\_\_\_\_

**Phone Number:**\_\_\_\_\_ **Cell Number:**\_\_\_\_\_

**Email Address:**\_\_\_\_\_

**NOTE: Separate Medical and Liability Waiver is required, The Classics Medical Waiver can be filled out at first session or downloaded from [www.classicsbb.com](http://www.classicsbb.com) (See Documents and Forms below News).**

**Contact Andy Stadnik - 301-706-6902 or at [info@classicsbasketball.com](mailto:info@classicsbasketball.com)  
For more information about Classics Basketball go to [www.classicsbasketball.com](http://www.classicsbasketball.com)**