



Boys and Girls Youth Camp & Competition Kindergarten – 4th Grade

Presented by West Catholic Basketball

*Deadline for Early registration
December 1st

WEEK 1

December 16th

Athletes will be registered, receive their shirts, and practice skills necessary to compete in the sport of basketball, and play game 1.

COMPETITION DAYS

Students will compete against each other in game format

COST

After December 1st:
\$70

Registration before Dec 1st: \$60

Cost Includes:

- 5 competition dates,
- t-shirt,
- Youth night player admission w/pizza dinner.

YOUTH NIGHT

January 26th
vs
Allendale

NEW THIS YEAR

Divisions



K-2nd will be co-ed and separated based on the number of participants

3rd and 4th Grades will be Girls and Boys Teams

Ideally, Teams will be capped at 10*



Youth League Basketball at West Catholic

* Subject to change if necessary

RULES OF THE LEAGUE

Games will be 16 minute halves with 2 minute halftime

Participants must play minimum of 12 minutes

All MHSAA basketball rules/violations will be monitored by Officials

No zone defense will be played

No pressing will be allowed

***Platoon Substitutions will be made every 4 Minutes**



DATES FOR THE CALENDAR

Competition Dates:

December 16
January 6
January 20
January 27
February 3

Games are between
9:00 am-2:00 pm

Practice: 45 minutes prior to game

Schedule of games will be made after the number of teams is determined.

COACHES

All teams will be coached by members of the Boys and Girls Basketball Programs

Members will referee and keep score

QUESTIONS

Contact Joe Gietzen at:
233-5929 or
Westcatholicbasketball@gmail.com
or
Jill VanderEnde
490-6855
or Kirk Kambestad at
boysbasketball@grwestcatholic.org



NAME: _____

CURRENT GRADE: _____

GENDER: (CIRCLE ONE) M F

CURRENT SCHOOL: _____

STREET ADDRESS: _____ CITY _____ ZIP _____

PHONE: _____ PARENT EMAIL: _____

T SHIRT SIZE: YOUTH S M L XL or ADULT S M L XL (circle one please)

I would like my child to play on a team with (one other person, Must turn in before December 1st): _____

Emergency Contact Person and Phone Number: _____

I understand there is a possibility of injury while participating in this camp. My child is in sound health and able to participate in the activities associated with the league without undue duress. I waive the Camp Staff, Catholic Secondary Schools, and its employees of any liability. Parent Signature: _____

I give my permission to Youth League Basketball at West Catholic, to use my child's photograph, and/or video recording for promotional purposes on the "Youth League at West Catholic" Facebook Page and on Twitter: @YLBALLWC. Parent Signature: _____

****Please send registration to: West Catholic High School, Attn: Joe Gietzen, 1801 Bristol NW, Grand Rapids, MI 49504
Make Checks Payable to: West Catholic High School (\$60 BEFORE DECEMBER 1ST, \$70 AFTER DECEMBER 1ST)