

**RCRA PRESENTS:**  
**TRAVEL & JR. PRO**  
**BASKETBALL**  
**5TH & 6TH GRADE BOYS & GIRLS**



**BOTH LEAGUES WILL PLAY GAMES AGAINST TEAMS FROM SURROUNDING COMMUNITIES. These will include Perry, Owosso, East Lansing, Haslett, Potterville, Webberville, Eaton Rapids, Lansing Christian, Morrice, Fowlerville, Dansville, Stockbridge, DeWitt, Corunna, Durand, Portland and Laingsburg.**

**SEASON:** November through March, 2010

**REGISTRATION & TRY-OUTS**

**FEES:** \$110 per participant  
 \$105 per participant living in a contributing town-ship

Williamstown & Leroy, or City of Williamston

**GAMES:** Saturdays, home games at Williamston Middle School-travel involved

**PRACTICES:** Twice per week

**Registration Deadline: October 30, 2009**

**Drop off registration form or mail to RCRA  
 418 Highland St., Williamston, MI 48895**

**Tryouts: Mandatory for Jr.Pro(both days)**

**Optional if just signing up for travel ball**

**Tryouts are at Old Gym in High School**

5th grade girls: November 4, 5:30-7:00pm @ High School

November 5, 5:30-7:00pm @ High School

5th grade boys: November 2, 5:30-7:00pm @ High School

November 3, 5:30-7:00pm @ High School

6th grade girls: November 4, 7:00-8:30pm @High School

November 5, 7:00-8:30pm @ High School

6th Grade boys: November 2, 7:00-8:30pm @High School

November 3, 7:00-8:30pm @High School

**TRYOUTS ARE CLOSED TO PARENTS BUT WILL BE A PARENT MEETING IMMEDIATELY PRIOR TO TRYOUT**

**Travel/Jr. Pro Basketball 2009/10 Registration Form**

Name: \_\_\_\_\_ Phone#: \_\_\_\_\_ Cell# \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

E-Mail: \_\_\_\_\_

We live in (circle one): **City - Williamstown - Leroy - Other:** \_\_\_\_\_

Boy or Girl Grade(2009/10) \_\_\_\_\_ Age \_\_\_\_\_ **Travel** \_\_\_\_\_ **Jr. Pro** \_\_\_\_\_ (please mark one)

Parent/Guardian \_\_\_\_\_ Work Phone# \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Work Phone# \_\_\_\_\_

Does your child have any medical problems/concerns we should know about? No \_\_\_\_\_ Yes \_\_\_\_\_

Please explain: \_\_\_\_\_

**Parents:** I want to help in the program as: **Coach** \_\_\_\_\_ **Ass't.Coach** \_\_\_\_\_ **Phone** \_\_\_\_\_

I hereby waive any and all claims against Red Cedar Recreation, Williamston School District and all persons affiliated with this program. I understand that there are inherent dangers in playing this sport and I hereby agree to hold Red Cedar Recreation and all persons affiliated with it harmless from any liability, except for cases of gross negligence, arising from this Red Cedar Recreation program in which the above-named child is participating:

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

**QUESTIONS? Call the RCRA office at 655-2174, ext. 5700 or check our website at [www.redcedarrec.com](http://www.redcedarrec.com)**