



# NORWELL "SQUIRES" BASKETBALL LEAGUE



## "Where Squires learn to become KNIGHTS"

**What:** Norwell "Squires" Basketball League  
**Who:** Any boy or girl in grades 3, 4, 5, or 6. **No basketball experience is necessary to participate in the league—this is an instructional league and is part of the Norwell Knights Basketball feeder system.**  
**Where:** Games to be held in the Auxiliary Gym at Norwell High School on Saturday mornings  
**When:** League will run from late September through early December  
**Cost:** \$70 for one child; \$60 for each additional child from the same family  
**Make checks payable to Norwell Squires League. *Please send registration form and payment to Norwell High school, Boys Varsity Coach Mike McBride or Girls Varsity Coach Eric Thornton, 1100 E. U.S. 224, Ossian, IN 46777. Call 543-2213 ext.7116 (Coach McBride) or 543-2213 ext. 7203 (Coach Thornton) for further information.***

**Deadline for registration is Friday, September 10, 2021**

### Important Dates

- **Team Selection Meeting (All Players):** Monday, September 20
  - **Girls grades 3-6 will meet from 5:30 – 6:15 pm in the NHS Main Gym**
  - **Boys Grades 3-4 will meet from 5:30 – 6:15 pm in the NHS Aux Gym**
  - **Boys Grades 5-6 will meet from 6:15 – 7:00 pm in the NHS Aux Gym**
- **First week of practice:** September 27 (Teams will practice 1-2 times during each week)
- **22<sup>nd</sup> Annual Squire League Game Dates:** Oct. 9, 30 (pictures); Nov. 6, 13; 20; Dec. 4, 11, 18 (Super Saturday)

-----**(Cut Here)**-----

Participant's Name: \_\_\_\_\_ Parent Name(s): \_\_\_\_\_

Parent Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Grade: \_\_\_\_\_ Height: \_\_\_\_\_ Boy/Girl (circle one)

Player Shirt Size (circle one): Youth – **S M L** Adult – **S M L XL**

# Years you have played basketball: \_\_\_\_\_ Did you play in the Squires League last year? **Y N**

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Please remember that everyone's time is valuable and we need you to get involved in your son's or daughter's athletic development. Thanks! (*If you are selected to be the head coach your money will be refunded.*)

<b>Would you like to be a head coach?</b>	<b>Assistant Coach?</b>	<b>Coach Shirt Size</b>
Yes No	Yes No	<b>S M L XL XXL XXXL</b>

By signing below, I will not hold the Northern Wells Community School Corporation, coaches, or participants liable for any injury that may occur during the participation of my child in the Squires Basketball League.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_