

# FUTURE FLEET BASKETBALL

December 2- January 14



**What:** Basketball League Registration/Skill Night

**When:** Thursday, December 2nd

6:00 pm – 6:45 pm ages 4-8 years old

6:45 pm- 7:30 pm ages 9-12 years old

**Where:** Belk Arena in the Galloway Center at Erskine

**Cost:** \$50 per child (Ages 4 – 12)

Your child needs to attend the Skill Day to be placed on team. Please find registration form on reverse side. It can be returned by mail to Mark Peeler, PO Box 338, Due West, SC 29639 or email to [mlp@erskine.edu](mailto:mlp@erskine.edu). You can bring registration to Skill Day at the \$50 rate.

**Includes:** - 6-game season plus playoff game

<i>Monday, December 6</i>	<i>Team Practice</i>
<i>Thursday, December 9</i>	<i>Game #1</i>
<i>Monday, December 13</i>	<i>Game #2</i>
<i>Saturday, December 18</i>	<i>Game #3</i>
<i>Thursday, December 30</i>	<i>Game #4</i>
<i>Monday, January 3</i>	<i>Game #5</i>
<i>Tuesday, January 11</i>	<i>Game #6</i>
<i>Saturday, January 15</i>	<i>One-Game Playoff</i>

-T-shirt & personal basketball provided to all participants

**-ALL ERSKINE GAMES ARE FREE GENERAL ADMISSION FOR PLAYERS WEARING FUTURE FLEET SHIRTS**

Please email or call with questions to Mark Peeler, VP for Athletics at (864) 379-8850 or [mlp@erskine.edu](mailto:mlp@erskine.edu)

# Future Fleet Basketball Registration Form

**Please fill out form completely and legibly:**

Child's name: \_\_\_\_\_

Birth date: \_\_\_\_\_ Current age: \_\_\_\_\_ Boy / Girl (circle one)

Home Address: \_\_\_\_\_

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

Contact phone #: \_\_\_\_\_ Year Playing Future Fleet \_\_\_\_\_

Contact email address(**required**): \_\_\_\_\_

Shirt size: YS YM YL S M L XL (circle one)

Parents/Guardians(print): \_\_\_\_\_

Current school: \_\_\_\_\_ Grade: \_\_\_\_\_

**Disclaimer:** I realize that there are inherent dangers in sports participation. I understand that Erskine College, players, coaches, or any other entities/employees of Erskine College and it's Athletics program cannot be held responsible for any accident or injury which may occur during any Future Fleet Basketball League game, practice, or activity. I give permission to Future Fleet Basketball League volunteers/coaches and employees of Erskine College to seek appropriate medical care including hospitalization and emergency treatment.

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

**\*\*\*We will use contact email address to contact you with team and schedule information. The first and only practice will be on Monday , December 6th. We will also use email to alert you in the event that games need to be changed during the season so please make sure we have an email.**

**Registration form and check can be mailed to: Mark Peeler, VP for Athletics, Erskine College, PO Box 338, Due West, SC 29639 or brought to Skill Night (December 2<sup>nd</sup>) 6:00 pm 4-8 yrs., 6:45 pm 9-12 yrs ). Make checks payable to: ERSKINE COLLEGE**