



COZAD BASKETBALL

BUILD YOUR LEGACY ON THE 100th MERIDIAN

State Champions: 1953 & 1970

State Runner-Ups: 1969 & 1971

State Basketball Appearances

1915 - 1916 - 1921 - 1948 - 1953 - 1969

1970 - 1971 - 1972 - 1979 - 2014

Dear Cozad Youth and Parents,

I am excited to start up the Maker Youth Basketball Program (MYBP). Your son is now in the stage where we can start to advance some of the fundamentals they have learned in the past. I am excited to start to work with the Cozad youth to improve and grow our program into a competitive group at the high school level year in and year out. In order to build the right foundation we need to start with implementing the proper fundamentals and mindset now. Over the course of 7 weeks you will have the opportunity to become a better basketball player. Our focus will be to improve your skills of shooting, passing, dribbling, and understanding the game.

Parents if you are interested in coaching a traveling team in grades 4th thru 8th grade please indicate that on the form below and mail it back to me or email me regarding your interest. Anyone interested in coaching this season will need to come to these work-out sessions as well. This will give you a chance to understand the concepts and principles that I would like to have be consistent in the program. I will be able to give you drills and show you the techniques we want our players to have in their game. We want to develop every kid to have all the proper basketball skills to be all-around players.

DATES: November 8th, 15th, 21nd, & 29th, Dec 6th, 13th & 20th -- ALL AT COZAD HIGH SCHOOL GYM

COST - \$25.00 Make Checks payable to Cozad Community Schools

1:00 PM - 2:20 PM 4th - 5th Grade

2:30 PM - 4:15 PM 6th - 8th Grade

If I can ever be of help please contact me at nick.broz@cozadschools.net or 308-340-5138. Also, you can follow me on twitter at @CoachBroz

Yours in Basketball,

Coach Broz

-----CUT & RETURN-----

2020-21 Events Waiver For Boys Basketball

By signing the following waiver the parent/guardian will allow the student to participate in the above dates for any of the basketball events and absolves Cozad Community Schools/Nick Broz and assistant coaches, and any other of its affiliates of liability in case of accident, injury, illness/viruses or loss of property during participation in the camp.

Students Name _____ Grade _____ T-Shirt Size: Youth or Adult _____

ParentsName _____ Do You Want to Coach _____

Address _____ City _____ ST _____ Zip _____

Phone # (____) _____ Parents Email: _____

Student Signature _____ Date _____

Parent Signature _____ Date _____

Make checks payable to Cozad Community Schools