

Havoc Makers

Cozad Girls Youth Basketball Program

When/Where: Every Sunday Night; Nov. - 8th, 15th, 22nd, 29th and Dec.- 6th, 13th; High School

Age: K-8th

Cost: \$35 **Time:** 5:00-5:45 (K-2nd), 6:00-6:45 (3rd-5th), 7:00-7:45 6th-8th;

Sunday Nights: This will be a 6 week program for every Little Lady Haymaker that wants to develop fundamentals. My Staff and Volunteers will be there to help with Dribbling, Passing, Shooting form, and Defensive stance. We will start with entry level basketball fundamentals and work our way up in each age division with more skilled basketball moves. The \$30 getting Havoc Maker shirt and will help start a youth program that the town of Cozad can be proud of! We want everyone to come join the movement and work towards making this a fun environment for our young athletes.

Basketball Team's

We are also forming teams for grades 3rd-6th to compete in local tournaments. If your athlete is interested in playing in a tournament please let us know so we can get you on the list. Our numbers in the past in some grades have been low and we couldn't form a team. Would like to get everyone a chance this year to at least play in a league or travel team. Anyone interested in coaching one of our travel teams this year please contact me.

Covid Policy - We ask that everyone that comes into the gym wear a mask and hand sanitizer at the door. Hoping that adding the extra time slot will get us smaller groups so we can keep the athletes spaced out and keep everyone healthy. Also we will wipe down every basketball and hand sanitize in between our breaks so that the girls are following Covid Guidelines. Want to keep our youth safe and still be able to have a camp for them to keep them on this great path we have started these past couple of years. Thank you if you have any questions or concerns email me..... Zach.stauffer@cozadschools.net

Havoc Makers Youth Program

Name: _____ Grade: _____ T-Shirt Size: _____

Tournaments/League (3rd-8th Grade ONLY) - (Y/N): _____

Contact Info:

Parent(s)/Guardian(s): _____

Phone #: _____ Email: _____

***Bring to the First Sunday filled out**

***Checks payable to Cozad Community Schools**