

# FUNDAMENTALS FIRST

## ALL-SPORTS CLINIC SCHEDULE

### WINTER 2010

#### TUESDAY

2/23/2010 – 3/30/2010

4:15-5:15 *Kindergarten/1<sup>st</sup> Grade*

#### THURSDAY

2/25/2010 – 4/01/2010

4:15-5:15 *Kindergarten/1<sup>st</sup> Grade*

**6 WEEKS ~ \$125**

“FUNDAMENTALS FIRST” are classes designed to introduce young boys and girls to the basic fundamentals of a variety of sports through fun-filled drills and games designed for Kindergarten and 1<sup>st</sup> graders to develop motor skills, cooperation and healthy interest in active sports. Children will play basketball on 7ft baskets, kick soccer balls into goals, shoot to score in hockey, take a swing at baseballs, throw and kick footballs, bowl a few frames, ride scooters and climb a rock wall. The emphasis is on teamwork and sportsmanship. We encourage kids to try their best and have FUN.



@ Sports University  
 22 Madison Rd \* Fairfield, NJ \* 07004  
 ph: 973-808-1717 (x11)  
 fax: 973-808-1755  
 www.sports-u.com



**SPORTS UNIVERSITY**

Make checks payable to: **SPORTS UNIVERSITY**

**REGISTRATION FORM**

(check day attending)  Tuesday  Thursday

Name \_\_\_\_\_ Address \_\_\_\_\_  
 Age \_\_\_\_\_ D/O/B \_\_\_\_\_ Grade \_\_\_\_\_ Gender \_\_\_\_\_  
 Telephone (H) \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_  
 Enclosed: Amt \$ \_\_\_\_\_ Check # \_\_\_\_\_ Credit Card Visa MC  
 Acct. No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

I hereby authorize the agents of Basketball Fundamentals Inc. and Sports University to act for me according to their best judgment in any emergency requiring medical attention; and release and discharge Basketball Fundamentals Inc., Sports University, staff, affiliated entities, and their employees from and against any and all liabilities or causes arising out of my child's participation in the program.

PARENTS SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**BIRTHDAY PARTIES** – call to inquire about price and times