



Dear Players and Parents:

The Butler Community College men's basketball staff would like to welcome you to participate in our summer league basketball program. Over the past 3 years we have enjoyed over 450 participants and expect 2009 to be the biggest summer league to date. In order to be a great team during the season, it takes hard work in the summer learning how to play together while building team chemistry. The Butler Coaching Staff will make a commitment to you and your team to help individuals and teams reach their full potential. Make sure to get your team signed up right away for the 2009 Grizzly Summer League!

Sincerely,

Mike Bargaen  
Head Coach



### Location

Games will be held at the El Dorado Recreational Center, which is connected to El Dorado High School gymnasium.



### When

Games will be held Monday - Thursday beginning June 1<sup>st</sup> and ending July 2<sup>nd</sup>. Game times will run every hour starting at 6:00, 7:00, 8:00, and 9:00. Game schedules will be made to accommodate travel time, and teams should plan on playing two games a night, once a week. Schedules will be sent to coaches before the league starts.



### League Features

- 10 game guarantee
- All-Star game
- League T-Shirts



### Other Pertinent Information

- Officiated games
- Must provide own team uniform & basketballs
- Teams must provide own clock operator & score keeper



### Divisions

- Varsity High School – boys and girls divisions
  - Junior Varsity High School – boys and girls divisions
- \* grade divisions based on Fall 2009*



### League Registration

Name: \_\_\_\_\_ Age \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Grade:(Fall-'09) \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone(\_\_\_\_) \_\_\_\_\_

Parent's Home Phone(\_\_\_\_) \_\_\_\_\_

Summer League Team: \_\_\_\_\_

Age Group: Varsity Boys          Varsity Girls  
(Circle One)                                  Junior Varsity Boys          Junior Varsity Girls

Summer League Coach: \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_



### Cost

**\$600 TEAM RATE IF REGISTERED BY MAY 22<sup>nd</sup>**

**\$700 TEAM RATE AFTER MAY 22<sup>nd</sup>**

- Teams must have a minimum of 6 players and a Coach!!

-Mail all registration forms and payment together!

**Make Checks Payable in full amount to:**

**Mike Bargaen**

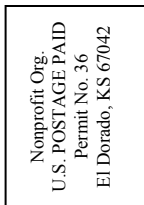
Mail To: Mike Bargaen  
Men's Basketball Office  
Butler Community College  
901 S. Haverhill  
El Dorado, KS 67042

**Medical Waiver Release and Medical Authorization**

The release and the medical authorization must be signed by a parent or guardian in order for students to participate in league activities.

**Release of Liability**

In consideration of the Grizzly Summer Basketball League granting the student permission to participate in the summer basketball league, I hereby assume all risks of his/her personal injury that may result from Grizzly Summer Basketball League activity. As parent/guardian, I do hereby release the Kansas State Board of Regents, Grizzly Summer Basketball League, their officers, employees, and agents and all instructors and all participants in said Grizzly Summer Basketball League program from all liability, including claims and suits at law or inequity, for injury which may result from the student taking part in Grizzly Summer Basketball League activities.



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

**Health Statement/Medical Authorization**

I do hereby affirm that the applicant is in good health and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved. Furthermore, I have no knowledge of any reason that the applicant cannot participate in vigorous activity. I hereby authorize and give my consent to the health authorities of Grizzly Summer Basketball League or any licensed physician or athletic trainer to perform upon or administer, without prior consent, any reasonable, necessary medical treatment to:

\_\_\_\_\_  
Participants Name Date

I agree to assume all costs related to such treatment. I understand that I will be responsible for any medical or other charges in connection with the student's participation in this league.

\_\_\_\_\_  
Signature of Parent(s) or Legal Guardian Date

\_\_\_\_\_  
Insurance Company

\_\_\_\_\_  
Policy Number

**Questions:**  
Mike Bargaen (316) 322-3205  
Joe Flynn (316) 322-3209

Butler Men's Basketball  
Mike Bargaen  
901 S. Haverhill  
El Dorado, KS 67042

June 1<sup>st</sup> - July 2<sup>nd</sup>  
2009

*Deadlines:*  
*Pre-Registration May 22<sup>nd</sup>*  
*Final Registration May 27<sup>th</sup>*