

# Downtown Basketball League + Clinic

# NOVEMBER TIP-OFF!

## Instructional League Play

Weeknight evenings  
November 6 to March 26

## Seven Divisions

**2nd and 3rd Grade Girls**  
Tuesdays, 6:15 pm, P.S. 234

**2nd and 3rd Grade Boys**  
Fridays, 6:15 pm, P.S. 234

**4th and 5th Grade Girls**  
Wednesdays, 6:15 pm, P.S. 234

**4th and 5th Grade Boys**  
Thursdays, 6:15 pm, P.S. 89

**Middle School Girls**  
Wednesdays, 6:15 pm, P.S. 89

**6th and 7th Grade Boys**  
Fridays, 6:15 pm, P.S. 89

**8th and 9th Grade Boys**  
Saturdays, 4 pm, P.S. 89

## Weekend Clinics

Manhattan Youth's All-Star **Lamont Williams** teams up with collegiate coaches and players to run the Downtown Basketball Clinic on weekends this winter. This high-level instruction is focused on learning both individual and team-based advanced basketball skills. Each week we will focus on a specific skill or set of skills, such as shooting, passing, ball handling, defense and more. Every fourth week, each group will break up into teams to have a day of tournaments. These tournament-style games will be at the same time and place as the clinics. The 12-week program begins November 14.

**2nd and 3rd Grade Girls**  
Saturdays, 10 am, P.S. 234

**2nd and 3rd Grade Boys**  
Saturdays, 12 pm, P.S. 234

**4th and 5th Grade Girls**  
Saturday, 2 pm, P.S. 89

**4th and 5th Grade Boys**  
Saturday, 9 am, BMCC

**Middle School Girls**  
Sunday, 9 am, BMCC

**Middle School Boys**—Sunday, 9 am, BMCC

See reverse side for fees and registration.

**MANHATTAN YOUTH**  
DOWNTOWN COMMUNITY CENTER

120 Warren St. between Greenwich and West Streets [www.manhattanyouth.org](http://www.manhattanyouth.org) 212-766-1104





# Downtown Basketball League & Clinic Registration

Today's Date: \_\_\_/\_\_\_/\_\_\_  
Month Day Year

120 Warren Street  
New York, NY 10007

## Downtown Basketball Policies

**Withdrawals & Refunds:** There are no refunds on any fees for the Downtown Basketball League or the Downtown Basketball Weekend Clinic.

**Missed Sessions or games:** There may be cancelled games or sessions during the season due to weather or other unexpected facility closures. If this happens, we will make every attempt to schedule a makeup game or session, but one is not guaranteed.

**League Policies and Conduct:** All players and parents must read and agree to the terms of the DBL Regulations. The DBL Regulations page is available on [www.manhattanyouth.org](http://www.manhattanyouth.org)

**Be Prepared:** All players must wear appropriate athletic clothing. All players must also wear appropriate footwear for basketball.

**Please make note of our general closure schedule:**

**There are no games or sessions on:**

11/11, 11/26-11/29, 12/22-1/3, 2/15-2/21

Please also see **Weekend and Weekday Specific Schedules.**

Available at [www.manhattanyouth.org](http://www.manhattanyouth.org)

## Coaching & Sponsorship

- I am interested in coaching a team.
- I am interested in sponsoring a team.

## Payment and Billing Information

- Weeknight DBL Fee - \$185**
- Weekend DBC Fee - \$185**
- Sign up for both and save - \$320**  
Scholarships are available. Please email [mona@manhattanyouth.org](mailto:mona@manhattanyouth.org) for info.

## Payment Options:

- I am a **DCC Member**, please charge my account
- Check**, made out to Manhattan Youth
- Automatic Credit/Debit Card** - I authorize Manhattan Youth to charge my grand total amount to my card.

\_\_\_\_\_  
Print name as it appears on the card  AMEX  VISA  MC

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Credit/Debit Card Number Expiration Date

## Participant Information

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

Gender:  M  F Date of Birth: \_\_\_\_\_  
Last Name First Name Month Day Year

School: \_\_\_\_\_ Grade in Sept. 2009: \_\_\_\_\_

Special Needs?  Yes  No

If yes, please describe: \_\_\_\_\_

Do you have a DCC Family Membership?  Yes  No

**If yes, go to the please simply check the appropriate box on the left side of this form and sign the consent on the bottom.**

## Parent #1 (or Participant for adult classes) Information

Name: \_\_\_\_\_  
Last Name First Name

Employer: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address: \_\_\_\_\_  
PLEASE PRINT EMAIL ADDRESS CLEARLY

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_  
Apt#

Emergency Contact (not parent): \_\_\_\_\_

Phone: \_\_\_\_\_

## Parent #2 (adult registrant—leave blank) Information

Name: \_\_\_\_\_  
Last Name First Name

Employer: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_  
PLEASE PRINT EMAIL ADDRESS CLEARLY

Home Address: \_\_\_\_\_  
Apt#

City: \_\_\_\_\_ St: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact (not parent): \_\_\_\_\_

Phone: \_\_\_\_\_

## PARENTAL CONSENT

**I HAVE READ**, understand, and agree to the Downtown Basketball playing and refund policies.

**I UNDERSTAND** that Manhattan Youth reserves the right to limit, deny or terminate enrollment and participation in order to maintain the safety of the program, its students and staff.

**PERMISSION IS GIVEN** for me or my child to be photographed, videotaped or otherwise recorded during activities, and for any such photographs to be displayed by Manhattan Youth in any medium (newsletters, web sites, etc.), whether now or hereafter known or developed.

SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_