



Name : _____ Date: _____

Congratulations:

You have been selected to be a member of the 10U MyHoopsLink Basketball Team for the 2009 season.

Please have the \$500 fee (checks payable to DC Assault), a copy of your birth certificate, the signed Parent/Player contract, and the signed Parents Code of Ethics available on or before the first scheduled practice.

***First Practice/Team Meeting:**

Will be on: _____, at _____
(Date) (Time)

at _____ School.

Thanks ,