



Grand Haven Area Public Schools  
 1415 Beechtree St., Grand Haven, MI 49417  
 Phone: 616.850.5125 Fax: 616.850.5127  
[nora.ghaps.org](http://nora.ghaps.org)

# 2018 B Cubed Basketball Winter Challenge League

## TEAM REGISTRATION FORM



**SEASON DATES:** Saturdays, January 13 – March 17, 2018

**GRADES:** BOYS TEAMS 3<sup>rd</sup> – 8<sup>th</sup>                      **LOCATION:** Grand Haven Area Gyms

**TEAM COST BREAKDOWN:** \$60 per game. Can play 2 games per day.

Payment must be received at NORA by 3pm on the Monday before Saturday's games for teams to be scheduled that week.

**ADDITIONAL INFORMATION:**

- Flexible scheduling including doubleheader options or play specific weeks.
- Competitive match-ups all levels with MHSAA Certified Officials.
- Sorry we are unable to accept registrations at the gym. Must be pre-registered.
- For more league information contact: JP Huntington ([jphuntington@greenridge.com](mailto:jphuntington@greenridge.com))
- For game scheduling contact: Matt Haveman ([matthaveman@playonrecruiting.com](mailto:matthaveman@playonrecruiting.com))

ALL Players on the team must sign the player release form before they can participate and attach to team roster form. (See [www.bucsforbetterbasketball.com](http://www.bucsforbetterbasketball.com) for the forms)

**B3 Basketball Winter Challenge League**

**Event codes:** RECB877901 thru RECB87792020 (by date and number of games each day)

Game Fee: Total games \_\_\_ X \$60 = \$ \_\_\_\_\_ Enclosed

Team Name: \_\_\_\_\_ Grade of team \_\_\_\_\_

Coach Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip: \_\_\_\_\_

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

This team:  Practices in GH facilities     Does not practice in GH facilities

The undersigned has agreed to the commitment of the B3/NORA Winter Challenge League season for 2018 and agrees to take responsibility for his/her team(s) in said league. Individual team/club organizations will cover their own players' liability insurance and expenditures.

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

Please make team registration payments at the NORA Office, 1415 Beechtree St., Grand Haven, MI 49417  
 Fee due at time of registration. Mail-in or walk-in checks payable to NORA or Northwest Ottawa Recreation Authority.  
 Visa/MasterCard accepted or register online with password.