



2021 NFA GIRLS' BASKETBALL CLINICS



June 10-11 @ NFA 6:30-8:30pm
June 17-18 @ NFA 8:30am-11:30am
June 24-25 @ NFA 8:30am-11:30am
Girls only grades 6-9



June 21-23 @ NFA 8:30am-12:00pm
Rising 9-10th Grade Girls

**COME JOIN FOR INSTRUCTION BY COACHES AND PLAYERS
OF THE BACK-TO-BACK ECC GIRLS' CHAMPIONS AND #1 TEAM IN THE
STATE**

ALL PARTICIPANTS RECEIVE A T-SHIRT

Tuition: Cash or checks payable to NFA

First Clinic (June 10-11)	FREE!
Other Clinics:	1 Session = \$100
	2 Sessions = \$150
	3 Sessions = \$200

Mailing Address:
Norwich Free Academy
C/o Courtney Gomez
Head Girls Basketball Coach
305 Broadway
Norwich, CT, 06360
Email: gomezc@nfaschool.org

Players should bring a light snack and drink.

Prompt pickup at end of clinic. No supervision after this time.

***We will follow all COVID-19 guidelines in place by the State of Connecticut, CDC,
and local officials at the time of each clinic.***



NORWICH FREE
ACADEMY

2021 NFA GIRLS' BASKETBALL CLINICS

Dates Attending:

_____ June 10-11

_____ June 17-18

_____ June 21-23 (Rising 9-10th)

_____ June 24-25

Name: _____

Age: _____ **Grade:** _____

Address: _____

Current School: _____

Parent/ Guardian Name: _____

Phone Number: _____

Email: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

2021 Wildcat Hoop School and its coaches, employees, volunteers, agents, or any of its programming, instruction, and training, are not affiliated with, endorsed by, or sponsored by NFA Foundation, Inc.



NORWICH FREE
ACADEMY

NFA GIRLS' BASKETBALL CLINICS – MEDICAL INFORMATION

Name: _____

Date of Birth: ____/____/____

Gender: _____

Address: _____

Parent/ Guardian Phone Number: _____

Parent/ Guardian Email: _____

Pertinent Medical History: _____

Please list any allergies your child may have: _____

Does your child require any emergency medication (circle): YES NO

Please list any medication(s) your child is currently taking and reason for medication:

Current health problems/ concerns:

Special precautions you wish the school to know concerning your child:

***NORWICH FREE ACADEMY MAY CALL 911 FOR TRANSPORT TO NEAREST HOSPITAL
IN THE EVENT OF AN EMERGENCY**

My signature indicates that I have read and agree to NFA's terms and conditions about medical emergencies, and that the medical information that I have provided is accurate and complete.

Parent/ Guardian Signature: _____ Date: _____