

BLUE DEVILS

**YOUTH
BASKETBALL
PROGRAM
INFORMATION
PAMPHLET**

***2012 -
2013***

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W ELCOME:

GREETING TO ALL

FROM THE CLUB PRESIDENT & AND STAFF

THE DC BLUE DEVILS!

ON BEHALF OF THE DC BLUE DEVILS YOUTH BASKETBALL PROGRAM, WE WELCOME YOU AND YOUR FAMILY TO ONE OF THE BEST YOUTH BASKETBALL PROGRAM IN THE NATION!

OUR COACHING STAFF, CLUB MANAGERS ARE EXCITED ABOUT HAVING THIS OPPORTUNITY OF WORKING AND DEVELOPING YOUR SON(S) IN THIS SPORTS ARENA OF YOUTH BASKETBALL WITHIN THE POTOMAC VALLEY REGION.

THIS IS THE HOTTEST SPOT IN THE NATION FOR DEVELOPING YOUTH IN THE SPORT OF BASKETBALL

OVER THE NEXT FEW MONTHS, IF NOT YEARS, WE WILL DEVELOP A COURTESY, RESPECTFUL, AND REWARDING RELATIONSHIP WITH EVERYONE WITHOUT BASKETBALL FAMILY.

OUR GOAL IS TO BUILD HONEST RELATIONSHIP IN A PROGRAM THAT WILL PROMOTE FUN, SAFE AND COMFORTABLE BASKETBALL ENVIRONMENT THAT IS CONDUCTIVE TO LEARNING.

WE LOOK FORWARD TO PROVIDING AN AAU EXPERIENCE OF:

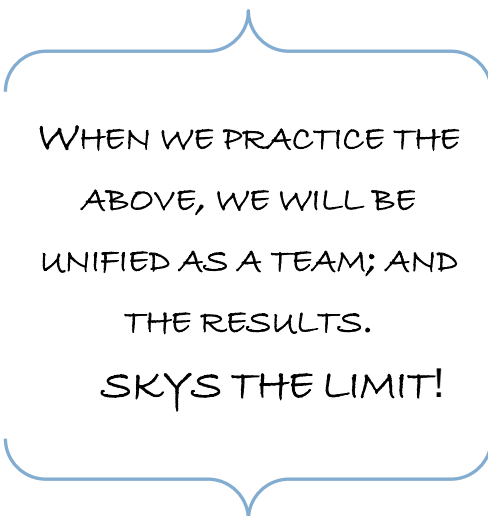
- HIGH ENERGY
- POSITIVE
- ENJOYABLE

INTRODUCTION:

IN THIS ARENA OF YOUTH BASKETBALL, WE ALL MIGHT AGREE THAT BASKETBALL HAS EVOLVED INTO A MAJOR SPORT; WHICH IS NOT AND SHOULD NOT BE TAKEN FOR GRANTED. YOUTH BASKETBALL CAN OPEN UP MANY DOORS FOR KIDS, SUCH AS PRIVATE SCHOOLS & COLLEGE; AS LONG AS THEY REMEMBER TO BE STUDENT ATHLETES. THIS CAN BE ACCOMPLISHED ONLY WITH A CONTINUED PARTNERSHIP AND INTEREST FROM THE PARENTS; UNTIL YOUR CHILD GRADUATES HIGH SCHOOL.

BASKETBALL IS NOT JUST A SPORT; IT'S A WAY OF LIFE, DEDICATION, SACRIFICE, AND CONCENTRATION OF ALL INVOLVED WE MUST BECOME A FAMILY WITH THE SAME TEAM PURPOSE AND TEAM GOAL. IT REQUIRES COORDINATION OF EVERYONE TO BECOME A WINNER!

- 1. TEAM DISCIPLINE
- 2. GREAT ATTITUDE



WHEN WE PRACTICE THE ABOVE, WE WILL BE UNIFIED AS A TEAM; AND THE RESULTS. SKYS THE LIMIT!

- 3. RESPECTFUL
- 4. POSITIVE ENERGY
- 5. STRUCTURE

M

MISSION / PURPOSE OF ORGANIZATION:

OUR MISSION IS TO INSTALL ACADEMIC AWARENESS TOWARDS EXCELLENCE, AS WELL AS VALUES, DISCIPLINE, AND LEADERSHIP IN OUR YOUTH ATHLETE'S.

THROUGH OUR PROGRAM, WE WILL PROVIDE ADVANCE LEVEL TRAINING WHICH SHOULD PROVIDE OUR PLAYERS THE OPPORTUNITY TO CONTINUE THEIR EDUCATION AND BASKETBALL CAREER AT ALL LEVEL INTO HIGH SCHOOL AND COLLEGE AND ULTIMATELY RECEIVED THEIR DEGREE.

ORGANIZATION TARGETED POPULATION:

- ❖ DC BLUE DEVILS YOUTH BASKETBALL PROGRAM WILL TARGET THE TRI-CITY AREAS, WHICH CONSISTS OF MARYLAND, WASHINGTON DC & VIRGINIA MALE YOUTHS.
- ❖ WE WILL IMPLEMENT SEVERAL EXPERIENCE YOUTH BASKETBALL PROGRAMS IN PRINCE GEORGES COUNTY AREA TO HELP FOSTER THE ONGOING DEVELOPMENT AND ENRICHMENT OF LIFE FOR THE AREA YOUTH AGES 6 TO 18.

AAU ELIGIBILITY REQUIREMENTS FOR AGE & GRADE

THE AAU SEASON STARTS SEPTEMBER 1ST AND ENDS AUGUST 31 OF THE NEXT YEAR.

EXAMPLE:

THE GRADE THE PLAYER IS IN AS OF OCT 1ST OF THAT SCHOOL SEASON

EXAMPLE:

AN ATHLETE IS ELIGIBLE TO PLAY DOWN A GRADE PROVIDED THEY MEET THE REQUIREMENTS

- GRADE AS OF OCT. 1ST, 2012 PLAY DOWN GRADE BIRTHDATE REQUIREMENTS
- 7TH GRADE 6TH GRADE BORN ON OR AFTER 9/1/2000

CLUB ASSOCIATION FEE:

1. EACH PLAYER WILL PAY AN ASSOCIATION FEE OF THREE HUNDRED DOLLARS \$300 PER PLAYER.

- FAMILIES WITH MULTIPLE PLAYERS IN THE PROGRAM WILL PAY \$300 FOR THE 1ST PLAYER, NEXT \$100 FOR EACH OTHER PLAYER AFTER THAT.
 - ALL FEES ARE DUE UPON RETURNING THE UPON RETURN THE REGISTRATION FORM...*terms of payment*: CHECK...CASH...MONEY ORDER
 - MAKE ALL CHECKS & MONEY ORDERS OUT TO JP SPORTS INC.
 - i. NEVER MAKE CHECKS OUT TO AN INDIVIDUAL
 - ALL RETURN CHECKS WILL COST ADDITIONAL \$35 FEE AND IS NON-NEGOTIABLE
 - PAYMENT ARRANGEMENTS CAN BE ARRANGED WITH JOHN C. PERRY: AS LONG AS ½ OF THE CLUB FEE IS PAID.
 - ALL FUNDS GIVEN MUST BE ACCOMPANIED BY A RECEIPT.

ALL PAYMENT GIVEN TO JP SPORTS INC. ARE NOT- REFUNDABLE

Association Fee Covers the Following:

- **Club** Workout locations
- provide qualified coaches for the teams
- uniforms
- AAU Card & insurance
- Team bags
- Pay ½ of the Potomac Valley AAU Regional's
- Pay ½ of the AAU D1 or 2 National Regional's
- Pay ¼ of the AAU D3 National Regional's
- Club Tee Shirts for the Players
- Teach fundamentals, basic and advance Skills
- Practice Uniforms – which are to be returned at the end of the season

CLUB COACHES RESPONSIBILITY:

HEAD COACH



PROVIDE EXPERIENCE HEAD COACHES AND AT LEAST ONE ASSISTANCE COACH TO EVERY TEAM WITHIN THE PROGRAM



OUR GOAL IS NOT TO ALLOW A HEAD COACH TO HAVE A KID ON THE TEAM, IF THAT HAPPENS; WE WILL INSURE FAIR TREATMENT OF ALL PLAYERS.



ARE RESPONSIBLE FOR COLLECTION OF TEAM UNIFORMS AFTER EACH TOURNAMENT



PROVIDE A MID AND YEAR END PLAYER SKILLS SET EVALUATION

ASSISTANCE COACHES



WE WILL HAVE AT LEAST ONE, BUT NO MORE THE TWO WILL BE ALLOWED TO DEAL WITH THE TEAM



THESE COACHES WILL HAVE A SPECIFIC JOB DURING PRACTICE'S AND ESPECIALLY DURING GAMES.



THEY ARE THE ONLY OTHER PERSONNEL ALLOWED ON THE TEAM BENCH DURING GAMES.

COACHES RESPONSIBILITIES

- SCHEDULING TEAM PRACTICE
- NUMBER OF PLAYERS
- INSURANCE ON ALL PLAYERS ON HIS TEAM
- NUMBER OF LEAGUES, GAMES, TOURNAMENTS
- TEAM MEETING
 - FUNDRAISERS FOR HIS TEAM
 - UNIFORM ISSUES
 - COLLECTING FEES
- PRACTICE LOCATIONS
- TOTALLY RESPONSIBLE FOR PAYING FOR ALL BILLS RELATED TO HIS TEAM...UNLESS PAYMENT ARRANGEMENTS ARE WORK OUT WITH PROGRAM PRESIDENT...

TEAM MAKEUP:

1. WE RECOMMEND NO MORE THAN 12 PLAYERS TO A TEAM... BUT IT WILL BE THE COACHES CALL TO MAX OUT HIS ROSTER.
2. ALL PLAYERS SHOULD BE ABLE TO PLAY AT THE HIGHEST LEVEL OF YOUTH BASKETBALL...IF NOT SHOULD NOT PLAY WITHIN THIS PROGRAM...BUT IT'S THE COACHES CALL.
3. TEAM CAN ONLY HAVE ONE HARDSHIP CASE...MORE THAN ONE HARDSHIP CASE MUST BE VOTED ON BY THAT TEAM COACH AND JOHN C PERRY, WHICH WILL ACCEPT ALL FINANCIAL RESPONSIBILITY.& GET APPROVAL FROM KEITH WILLIAMS OR JOHN C PERRY.
4. ALL PLAYERS MUST MAKE SCHEDULED PRACTICES; NO PLAYER IS GUARANTEE PLAYING TIME OR EQUAL AMOUNT OF TIME ONCE THEY MAKE THE PROGRAM.
5. IT IS AGREED & UNDERSTOOD THAT ONLY KEITH WILLIAMS AND/OR JOHN C. PERRY RESERVES THE RIGHT TO REMOVE OR DISMISS A PLAYER FROM THE PROGRAM AND HAS THE FINAL DECISION.

SEASONAL MISSION

THE CLUB BALL HANDLING & SHOOTING SKILL WORKOUTS WILL START ON OR ABOUT OCTOBER 28TH UNTIL LATE DEC 2012.

EACH TEAM SHOULD PARTICIPATE IN A FALL AND OR WINTER LEAGUE IN PERPETRATION FOR THE AAU REGIONAL EVENTS. THIS IS AT THE TEAM COACHES DISCRETION. ALL IT IS RECOMMENDED THAT ALL OUR TEAMS PARTICIPATE IN A COMPETITIVE SPRING LEAGUE BEFORE HEADING TO THE AAU NATIONALS.

SEASON CONSISTS OF:



CLUB WORKOUTS FOR ALL PLAYERS WITHIN THE PROGRAM

- ALL RETURNING PLAYERS WORKOUT IS FREE
- \$10 FEE FOR ALL NON-REGISTERED PLAYERS



NEW PLAYER TRYOUTS FOR THE PROGRAM WILL HAVE A ONETIME \$10 FEE



PLAYING IN COMPETITIVE AAU EVENTS



PLAYING IN COMPETITIVE LEAGUES



PLAYING IN THE POTOMAC VALLEY AAU REGIONAL'S



PROPERLY EVALUATION OF TEAM LEVEL OF PLAY AND PLAYING IN ONE OF THE 3 DIVISION OF THE NATIONAL EVENTS

FUNDRAISERS

WE HAVE TWO TYPES OF FUNDRAISERS

1. TEAMS ONLY FUNDRAISERS
 - a. CONTROLLED BY THE TEAM COACH
 - b. USED TO BENEFIT THE TEAM PLAYER/FAMILY OR WHO RAISED THE FUNDS
 - c. 10 % WILL GO TO THE CLUB, WHICH BE USED TO OFFSET ANY HARDSHIP WITH THE PROGRAM OR ANY OTHER TEAM.
2. CLUB FUNDRAISERS
 - a. BENEFIT THE CLUB AND HELPS TO OFFSET TEAMS ENTRY FEES NOTED IN THE CLUB ASSOCIATION FEES
 - b. 35% GOES TO THE CLUB
 - c. 65% WILL GO TO THE PLAYER WHO SOLICITED THE FUNDS

PLAYERS DONATED FUNDS

1. FUNDS DONATED TO THE PROGRAM FOR A PLAYER WILL BE USED TO THE PLAYERS IN SEASON EXPENSES.
2. AT NO TIME WILL THOSE FUNDS BE USED FOR ASSOCIATED FAMILY MEMBERS
3. EXAMPLE OF PLAYERS EXPENSES:
 - a. PLANE TICKETS
 - b. % OF CAR RENTALS
 - c. % OF BERTHING COST
 - d. PER DIEM FOR MEALS WHEN OUT OF TOWN
 - e. LEAGUE FEES
 - f. TOURNAMENTS FEES
 - g. TEAM GEAR FEES
 - h. OTHER ISSUES WILL BE DISCUSSED WITH THAT PLAYERS COACH

BLUE DEVILS INTER-CIRCLES

DEMARCUS COUSINS
CLUB SPONSOR



KEITH WILLIAMS
Club CEO

ETHAN WATSON-
6TH GRADE –
White
High School Coach

JOHN C PERRY
7TH GRADE COACH
High School
Coach

BRIAN INGE
10TH GRADE
/16 UNDER &
TRAINER

TBA
6TH
GRADE -
BLUE

SHIRLEY MACK
CLUB ADMINISTRATOR

Donald Holloway
8TH GRADE - BLUE

JAMAL SHIVERS
8TH GRADE COACH
- WHITE

**DC Blue Devils Youth Basketball Program
2012-2013**

Potomac Valley AAU Basketball Athletes and Registration Form

Athlete's Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Date of Birth: _____

Age: _____

(Birth Certificate required, please attach a copy)

School: _____

Grade: _____

LETTER OF CONSENT AND AGREEMENT

1. I THE PARENT(S) /GUARDIAN(S) _____ OF
PLAYER _____ *HEREBY CONSENT TO PARTICIPATE IN THE*
DC BLUE DEVILS YOUTH BASKETBALL AND RELATED ACTIVITIES
2. DC BLUE DEVILS ARE NOT RESPONSIBLE FOR ANY INJURIES OR MEDICAL CONDITION THE MAY OCCUR WHILE PARTICIPATING, BUT THE PLAYER IS COVERED BY AAU INSURANCE WHILE PARTICIPATING IN AAU BASKETBALL.
3. IT IS AGREED THAT DC BLUE DEVILS WILL PROVIDE ALL UNIFORMS TO EACH PLAYER, BUT AT THE END OF THE SEASON THE UNIFORMS WILL BE RETURNED, AND IF NOT THE PARENT OR GUARDIAN WILL BE FINANCIALLY RESPONSIBLE FOR THE UNIFORMS.
4. EACH PLAYER WILL PAY THE ASSOCIATION FEE OF THREE HUNDRED DOLLARS \$300;
TERMS OF PAYMENT: CHECKS; CASH OR MONEY ORDERS..
5. **MAKE ALL MONEY ORDERS PAYABLE TO: J P SPORTS INC.**
6. IT IS AGREED UPON THAT COACH JOHN C. PERRY RESERVES THE RIGHT TO REMOVE OR DISMISS A PLAYER FROM PROGRAM.
7. **ANY PAYMENT GIVEN TO THE JP SPORTS IS NON-REFUNDABLE AFTER THE THIRD BUSINESS DAYS.**

I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTAND THE ABOVE INFORMATION:

Parent(s)/Guardian: _____

Date: _____

DC BLUE DEVILS YOUTH BASKETBALL PROGRAM
2012-2013
POTOMAC VALLEY AAU BASKETBALL
MINOR RELEASE OF LIABILITY AND HOLD HARMLESS FORM

I/WE FULLY UNDERSTAND THAT:

(A) THERE ARE RISKS AND DANGERS ASSOCIATED WITH PARTICIPATION IN SPORTS ACTIVITIES, INCLUDING BUT NOT LIMITED TO THOSE OF BODILY INJURY, PARTIAL AND/OR TOTAL DISABILITY, PARALYSIS AND DEATH;

(B) THE SOCIAL AND ECONOMIC LOSSES AND/OR DAMAGES WHICH COULD RESULT FROM THOSE RISKS AND DANGERS DESCRIBED ABOVE COULD BE SEVERE:

(C) THESE RISKS AND DANGERS MAY BE CAUSED BY THE NEGLIGENCE OF THE PARTICIPANT OR THE NEGLIGENCE OF OTHERS, INCLUDING, BUT NOT LIMITED TO, THE RELEASE'S NAMED BELOW;

I/WE ACCEPT AND ASSUME SUCH RISKS AND RESPONSIBILITY FOR THE LOSSES AND/OR DAMAGES FOLLOWING SUCH INJURY, DISABILITY, PARALYSIS, OR DEATH, HOWEVER CAUSED AND WHETHER CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF RELEASE'S NAMED BELOW .

I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE THE DC BLUE DEVILS OR JP SPORTS INC., ITS MEMBERS, CLUBS, EVENT HOSTS, OTHER PARTICIPANTS, COACHES, INSTRUCTORS, OFFICIALS, SPONSORS, ADVERTISERS, OWNERS AND LEASES OF THE PREMISES USED TO CONDUCT THE EVENT AND EACH OF THEM, THEIR OFFICERS, DIRECTORS, AGENTS AND EMPLOYEES, ALL OF WHICH ARE REFERRED TO AS RELEASE'S, FROM ALL LIABILITY TO THE UNDERSIGNED, MY/OUR PERSONAL AND ALL CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OF DAMAGE TO PROPERTY, CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASE'S OR OTHERWISE.

ON BEHALF OF THE PARTICIPANT: AND INDIVIDUALLY, THE UNDERSIGNED PARENT(S) AND/OR LEGAL GUARDIAN(S) FOR THE MINOR PARTICIPANT EXECUTES THIS WAIVER AND RELEASE IF, DESPITE THIS RELEASE, THE PARTICIPANT MAKES A CLAIM AGAINST ANY OF THE RELEASE'S, THE PARENT(S) AND/OR LEGAL GUARDIAN(S) WILL REIMBURSE THE RELEASE'S AND THEIR INSURING COMPANY FOR ANY MONEY WHICH THEY HAVE PAID TO THE PARTICIPANT, OR ON HIS BEHALF, AND HOLD THEM HARMLESS

I/WE AGREE THAT THIS WAIVER AND RELEASE AGREEMENT COVER EACH AND EVERY EVENT SPONSORED BY THE DC BLUE DEVILS & JP SPORTS INC. AND FULLY UNDERSTAND THAT THE RELEASES ARE RELEASED AS TO EACH AND EVERY ACTIVITY AND EVENT.

I/WE HAVE READ THE ABOVE WAIVER AND RELEASE. IN ADDITION, UNDERSTAND THAT I/WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING IT.

PARENT OR GUARDIAN (RELATIONSHIP) _____ DATE _____

NAME OF PLAYER: _____ DATE _____

THIS FORM MUST BE SIGNED IN ORDER TO PARTICIPATE IN ACTING ORGANIZATION.

DC BLUE DEVILS YOUTH BASKETBALL PROGRAM
 2012-2013
 POTOMAC VALLEY AAU BASKETBALL
 PARENT/ LEGAL GUARDIAN INFORMATION & MEDICAL EMERGENCY FORM

IN CASE OF A MEDICAL EMERGENCY WHILE AT BASKETBALL PRACTICES OR GAMES;
 I/WE GIVE THE COACHING STAFF OF THE DC BLUE DEVILS PERMISSION AND AUTHORITY TO ACT
 ON MY/OUR BEHALF AND IN MY/OUR BEST INTEREST FOR MY/OUR CHILD (REN).

Name _____ DOB _____

MOTHER NAME PHONE NUMBER (C) _____ (H) _____ (W) _____	MOTHER NAME PHONE NUMBER (C) _____ (H) _____ (W) _____	MOTHER NAME PHONE NUMBER (C) _____ (H) _____ (W) _____
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OPTIONAL: IN CASE OF MEDICAL EMERGENCY AND IN THE ABSENCE OF US AS PARENTS/LEGAL GUARDIANS HERE IS OUR INSURANCE INFORMATION:

INSURER'S NAME: _____ NAME OF INSURANCE: _____

GROUP NUMBER: _____ MEMBER: _____

I HEREBY WAIVE THE COACHES OF THE DC BLUE DEVILS YOUTH BASKETBALL ORGANIZATION, THE ADMINISTRATION OF THE DC BLUE DEVILS ORGANIZATION AND ALL ITS SUBSIDIARIES FROM ANY/AND ALL LIABILITY FOR ALL INJURIES AND ILLNESSES INCURRED WHILE PLAYING BASKETBALL.

PARENT SIGNATURE: _____ DATE: _____

PARENT SIGNATURE: _____ DATE: _____

NOTE: A MINIMUM OF ONE SIGNATURE IS REQUIRED.
 PLEASE LIST BELOW ANY SPECIAL OR RECURRENT MEDICAL PROBLEM AND/OR SPECIAL INSTRUCTION FOR YOUR CHILD (REN) (E.G. ALLERGIES, ASTHMA, EST.)