

Jr. ELITE

Boys: 1st - 3rd Grade
Girls: 3rd - 5th Grade



4-Week Program

MONDAY ONLY

5:05pm - 5:55pm

#1: Aug 19 - Sept 9 (\$135)
#2: Sept 16 - Oct 7 (\$135)
#3: Oct 14 - Nov 4 (\$135)
#4: Nov 11 - Dec 2 (\$135)

#5: Dec 9 & Dec 16 (\$70)
#6: Jan 6 - Jan 27 (\$135)
#7: Feb 3 - Feb 24 (\$135)
#8: Mar 3 - Mar 24 (\$135)
#9: Mar 31 - Apr 21 (\$135)
#10: Apr 28 - May 19 (\$135)

WEDNESDAY ONLY

5:05pm - 5:55pm

#1: Aug 21 - Sept 11 (\$135)
#2: Sept 18 - Oct 9 (\$135)
#3: Oct 16 - Nov 6 (\$135)
#4: Nov 13 - Dec 4 (\$135)

#5: Dec 11 & Dec 18 (\$70)
#6: Jan 8 - Jan 29 (\$135)
#7: Feb 5 - Feb 26 (\$135)
#8: Mar 5 - Mar 26 (\$135)
#9: Apr 2 - Apr 23 (\$135)
#10: Apr 30 - May 21 (\$135)

THURSDAY ONLY

5:05pm - 5:55pm

#1: Aug 22 - Sept 12 (\$135)
#2: Sept 19 - Oct 10 (\$135)
#3: Oct 17 - Nov 7 (\$135)
#4: Nov 14 - Dec 5 (\$100)

OFF ON THANKSGIVING
#5: Dec 12 & Dec 19 (\$70)
#6: Jan 9 - Jan 30 (\$135)
#7: Feb 6 - Feb 27 (\$135)
#8: Mar 6 - Mar 27 (\$135)
#9: Apr 3 - Apr 24 (\$135)
#10: May 1 - May 22 (\$135)

TWO DAYS SIMULTANEOUSLY: \$250

THREE DAYS SIMULTANEOUSLY: \$365

Mike Ippjan and the Elite Instruction coaching staff presents a 4-week developmental program for boys and girls.

- Learn the Rules of the Game
- Passing
- Dribbling
- Shooting
- Defense
- Teamwork



The height of the baskets will vary (9ft to 10ft) to accommodate a wide range of ability/physical levels. We have several hoops. Each player will be able to shoot/play on the height that is right for them!!!

[DOWNLOAD JR ELITE FORM-PDF](#)



ELITE INSTRUCTION



Guardian's Name _____ Address _____ City _____ zip _____

Players Name _____ Gender _____ Age _____

Home Phone _____ Cell Phone _____ Email Address _____

Waiver, Release of Claims, and Assumption of Risk for Minor

I, as legal guardian or parent of _____, (hereinafter "Minor") hereby waive and release Elite Center, LLC, Elite Instruction, LLC, and IPM Investments, LLC from any and all liability for any injury or illness, regardless of severity, incurred by myself or Minor as a participant in an Elite Center, LLC or Elite Instruction, LLC class, workshop, event, program, or activity. I hereby authorize the staff and independent contractors of Elite Center, LLC, Elite Instruction, LLC, and IPM Investments, LLC to act according to their best judgment in any emergency requiring medical attention. I have no knowledge of any physical impairment that would affect my ability or Minor's ability to participate in a class, workshop, event, program, or activity. I further understand that Elite Center, LLC and Elite Instruction, LLC retain the right to use for publicity and advertising purposes photographs of participants in any Program.

As a participant or parent or guardian of a participant in the Program, I recognize and acknowledge that there are certain risks of physical injury and agree to assume the full risk of any injuries, including death, damages or loss which I or the above participant may sustain as a result of participating in any and all activities connected with or associated with such class, workshop, event, program, or activity. As a participant or parent or guardian of a participant in the Program, I recognize and acknowledge that there are certain risks related to communicable disease, including COVID-19 Coronavirus Disease and any mutation or variation thereof, and agree to assume the full risk of any injuries, including death, damages or loss which I or the above participant may sustain as a result of participating in any and all activities connected with or associated with such class, workshop, event, program, or activity. I agree to waive and relinquish all claims I or the above participant may have as a result of participating in a Program against Elite Center, LLC, Elite Instruction, LLC, IPM Investments, LLC, and its officers, agents, servants and employees from any and all claims from the injuries including death, damage or loss which I or the above participant may have or which may accrue to me (us) on account of participating in the class, workshop, event, program, or activity.

Guardian's Signature _____ Date _____

Please Note: All Registrations are final, non-refundable and non-transferable

Payment Info

(Circle One) **Visa** **Mastercard** **Discover** **Check** **Cash**

CC#: _____ EXP: _____

Name as it appears on the card _____ Signature _____

Billing Address _____ City _____ State _____ Zip _____

VENMO & ZELLE: mikeipjian@comcast.net