

# Scarlet Knights Basketball

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# R

# FALL HOOP FESTIVAL

## at the RAC

### IMPORTANT FALL HOOP FESTIVAL INFO

NJ PUBLIC SCHOOLS ARE CLOSED - NJEA TEACHER'S CONVENTION

- **Date:** Thursday & Friday, November 5 & 6, 2009
- **Time:** 8:30 AM – 12:30 PM
- **Place:** The RAC, Piscataway, NJ 08854
- **Who:** Boys in Grades 1 thru 6 & Girls in Grades 1 thru 8
- **Fee:** ONLY \$ 95.00

Heading the clinic will be the Knights Hoop Festival Staff

- R** Rutgers Men's & Women's Head Coaches  
**Fred Hill & C. Vivian Stringer**
- R** The Scarlet Knights Men's & Women's Players
- R** High School Basketball Coaches

### THE FALL HOOP FESTIVAL WILL STRESS FUNDAMENTALS AND INCLUDE:

DRILLS    LECTURES    MOTIVATION  
ACADEMICS    GAMES    INDIVIDUAL INSTRUCTION

**TWO-DAY FESTIVAL FEE: ONLY \$95.00**  
**DEADLINE FOR REGISTRATION IS**  
**FRIDAY, OCTOBER 30, 2009**

### ALL PARTICIPANTS WILL RECEIVE

- A FALL HOOP FESTIVAL T-Shirt
- Tickets to a Rutgers Men's Game
- Tickets to a Rutgers Women's Game
- Self-Improvement Workout Guide
- Membership to the Young Knights Club

**PLEASE MAKE CHECKS PAYABLE TO: KNIGHTS HOOP FESTIVAL**

**FOR MORE INFORMATION CALL 732-445-8349, 732-445-4291 OR 732-445-4251**

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

RUTGERS, THE STATE UNIVERSITY, IS NOT RESPONSIBLE OR LIABLE FOR ANY OF THE ACTIVITIES IN RESPECT TO RUTGERS SCARLET KNIGHTS FALL HOOP FESTIVAL; THE CLINIC DIRECTORS ARE AN INDEPENDENT CONTRACTOR. I HEREBY AUTHORIZE THE STAFF OF RUTGERS MEN'S & WOMEN'S BASKETBALL TO ACT FOR ME IN ANY SITUATION THE STAFF BELIEVES REQUIRES MEDICAL ATTENTION. I RELEASE AND HOLD HARMLESS RUTGERS UNIVERSITY AND THE RUTGERS MEN'S & WOMEN'S BASKETBALL STAFF, ITS DIRECTORS, SPONSORS AND FACILITIES FROM ANY CLAIMS, DEMANDS AND CAUSES OF ACTION OF WHATEVER NATURE OR CHARACTER OUT OF OR CONNECTED WITH THE ABOVE STUDENT'S PARTICIPATION IN CLINIC ACTIVITIES, INCLUDING CLAIMS AND LIABILITY FOR ANY AND ALL INJURIES DURING THE BASKETBALL CLINIC. I HEREBY GRANT RUTGERS MEN'S & WOMEN'S BASKETBALL FULL PERMISSION TO USE FOR PUBLICITY AND ADVERTISING PURPOSES, ANY PHOTOGRAPHS OR VIDEO TAKEN DURING THE SCARLET KNIGHTS FALL HOOP FESTIVAL BASKETBALL CLINIC. I HEREBY CONSENT TO HAVE MY CHILD PARTICIPATE IN THE 2009 SCARLET KNIGHTS FALL HOOP FESTIVAL AT THE RAC. I WILL NOT HOLD FULL COURT ENTERPRISES / LLC OR THE SCARLET KNIGHTS FALL HOOP FESTIVAL OR ANY OF ITS REPRESENTATIVES RESPONSIBLE FOR ANY LOSS OR INJURY.

Send application and payment to:

**KNIGHTS HOOP FESTIVAL**

**Men's Basketball**  
**83 Rockafeller Road**  
**Piscataway, NJ 08854**

**Matt Bloom**  
**732-445-8349**

**Men's Basketball**  
**732-445-4291**

**Women's Basketball**  
**732-445-4251**

[www.scarletknights.com](http://www.scarletknights.com)

DATE

PARENT OR GUARDIAN SIGNATURE