



# SPARQ

## XLR8 YOUR GAME

### BASKETBALL PERFORMANCE COMBINE

**1st SESSION  
FREE!!!**

**18 Sessions - Cost \$125  
October 7 to December 16**

**SPACE LIMITED  
6:1 Ratio**

**Thursdays 6:30 to 8:30 pm** (*Palm Valley Lutheran Church , Round Rock Off HWY 79*)  
**Saturdays 9:00 to 11:00 am** (*Old Settlers Park, Round Rock near sand volleyball courts*)

Participant's Name \_\_\_\_\_ Grade \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Please list any medical conditions, medications being taken, or allergies for participant \_\_\_\_\_

\_\_\_\_\_

### Waiver

**Fee due at the time of registration.** No refunds will be issued once course begins. I, the undersigned, agree my son/daughter is physically fit to participate in strenuous athletic activity, and waive SPARQ, Titans Academic & Athletic Program, Winning Ways Southwest, or Titans Basketball Club , and its officers and employees of any and all responsibility for injury or illness. I hereby authorize the directors of Titans Academic & Athletic Program to act for me according to their best judgment in any emergency requiring medical attention. I also understand that I am solely responsible for the payment of any such medical expenses.

Signature of Parent/Guardian \_\_\_\_\_

Check # \_\_\_\_\_ or Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_



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