

Basketball Skills Competition
Deadline 1/10/06

Name: _____ **Age:** _____

School: _____ **Teacher:** _____

Skill Level: _____ **High** _____ **Medium** _____ **Low**

Please check one the following areas of competition:

_____ Shoot on regular goal with competition in gymnasium

_____ Shoot on lower goal with competition also in gymnasium

_____ Competition for lower skilled athletes in separate room

Wheelchair Athlete? _____ **Yes** _____ **No**

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