

2017-18 HIGH SCHOOL YOUTH BASKETBALL LEAGUES

SEPARATE BOYS AND GIRLS LEAGUES

Community Recreation
Department
607 S. Water St.
Sheboygan, WI 53081
920.459.3773



ELIGIBILITY: This program is for any county resident currently in the 9th through 12th grades who is not participating in a high school sponsored basketball program.

ORGANIZATION: Players are to form their own teams and are encouraged to seek sponsors such as churches, civic groups or businesses, but it is not required.



- ❖ Based on a formula considering grade and experience, teams will be grouped into divisions by projected ability. (See formula on the back of this sheet)
- ❖ **All teams must have an adult manager at least 21 years of age listed at registration and he/she must be present for all games and practices.**
- ❖ **Matching jerseys or T-shirts with numerals are required along with proper basketball attire! Absolutely no nicknames will be allowed on the jerseys. Team names to be printed on schedules and shirts must be approved at the time of registration.**
- ❖ All teams will play 9-10 games.
- ❖ Practice gyms are available by reservation prior to the season.

LENGTH OF SEASON: Monday, December 4 through approximately Feb. 8. Mondays and Thursdays will be the primary nights of league play, but Tuesdays will also be used if we have a large number of teams.

ENTRY DEADLINE: **THURSDAY, NOVEMBER 2, 4:30 p.m. at the Recreation Department.**
Team entry fee and minimum roster of eight (8) players due.

LEAGUE MEETING: **THURSDAY, NOVEMBER 16 - 6:00 p.m.** At the Recreation Department Office (607 S. Water St.)
W.I.A.A. and League Rules will be reviewed and league schedules will be distributed.

ENTRY FEES:

Team Fee - \$300	Boys (Code 6748)	Girls (Code 6749)
✓ Individual resident fees - None		
✓ \$10.00 individual fee for out-of-Sheboygan school recreation tax district residents (Kohler, Sheboygan Falls, Plymouth, etc.)		
✓ \$3.00 additional fee for residents of Mosel, Cleveland or Centerville in the Sheboygan Area School District.		

NOTHING KILLS A PROGRAM QUICKER...than everyone waiting until the last minute to register.
If there are not enough registrants, the program is cancelled, and coming in the day after the deadline won't save it.
So, please register early!

OVER>>>



GUIDELINES FOR SEEDING HIGH SCHOOL LEAGUE TEAMS

Depending on the total number of teams entered, High School League Teams could be divided up into as many as 4 or 5 divisions. The following criteria will be used to determine these divisions:

I. PLAYERS RETURNING TO PROGRAM (see team rankings below)

A. Point values for players coming from **Group C** teams below

B. Point values for players coming from **Group B** teams below

C. Point values for players coming from **Group A** teams below

Sophomores	1	1.5	2
Juniors	2	2.5	3
Seniors	3	3.5	4

Players with prior year experience on a high school Freshman, JV or Varsity team are automatically assigned the highest point values as in "C" above. All rankings below go from highest division to lowest with division.

II. PLAYERS NEW TO PROGRAM

These players did not play Junior High, High School or High School League Basketball during the prior season.
No prior Basketball Experience

Freshmen	0 points
Sophomores	1 points
Juniors	2 points
Seniors	3 points

III. FINAL TALLY

The point values of all of the players on a team are added and divided by the number of players on the team to create a team value. Team values will then be ranked and grouped into league levels.

IV. 20016-17 HIGH SCHOOL RECREATION BASKETBALL LEAGUE OVERALL TEAM RANKINGS FOR RETURNING PLAYERS (See chart above).

SEASON RANKING

BOYS

Group A

FOH
Little Scalabrinies
Knights
All Stars

Group B

Legend Larry's
Goonies
150 Dream Team
Bieveland Bavaliers
Boom Baby Daggerz
Central High
Aim Group Insurance

Group C

Pizza Hut
Tower Academy



Sheboygan Area School District
 Community Recreation Department
 607 S Water St 459-3773

**Please Print Neatly!!
 Incomplete form NOT accepted.**

Official Rec Department Team Roster

Boys Code 6748

Girls Code 6749

Team Name: _____ Team Name Previous Year: _____

Name of Manager/Coach: _____

Address: _____ City: _____

Home Phone: _____ Daytime (Work) Phone: _____

Email Address: _____

Shirt color _____ Reversible YES NO

Additional Comments: _____

Team Fee: _____
 Individual Fees: _____ (C-C-M)
 _____ (Out of town)
 Total Paid: _____
 Cash Check CC Date filed/By: _____

There will no choice of game times. Teams must be available at any of the times advertised.

<i>Player Name</i>	Address	Grade	Point Value	Date Added
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				

As the manager, I hereby swear that all the information given above that this team will forfeit all of its games and I will be suspended if any of the information is false. As manager, I hereby accept the responsibility of making sure my players are in total understanding of all department regulations and rules governing this sport.

Manager's Signature _____ Date _____

