

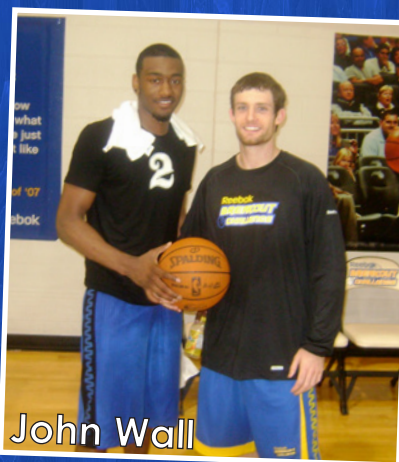
# Pure Sweat Basketball's *Elite Skill Development Clinic*

*Sponsored by Drew Hanlen/Pure Sweat and Gateway Basketball Club*

## **Drew Hanlen Bio:**

Drew Hanlen is an NBA Strategic Skills Coach & Consultant that has helped many NBA and NBA pre-draft player, including David Lee (Warriors) and John Wall (Wizards). He is the Head Skills Coach for Pure Sweat Basketball and has run his internationally renowned Elite Skills Clinics in over 30 states and 4 countries over the past four years. Drew is the Head Skills Coach for the Reebok Break-out Challenge and has worked various events for Nike Basketball. He has been featured in ESPN Rise, STACK, Dime, Men's Health, ESPN.com and Grantland.com

Pure Sweat Basketball's Elite Skill Development Clinics give players the opportunity to work with Drew Hanlen, and experience drills and techniques that he uses with his college and NBA clients on a daily basis.



John Wall



David Lee

**Date:** Saturday, April 6, 2013

**Time:** Ages 12 & up

9:00 am - 12:00 pm

1:00 pm - 4:00 pm

**Location:** McKenzie High School Gym  
23292 Highway 22  
McKenzie, TN 38201

**Cost:** \$70.00

**Space is limited; sign up today!**

## **Clinic features:**

- Resistance Dribbling Drills
- NBA Players' Signature Moves
- Ball Screen Work
- One-on-One Moves
- Finishing Techniques
- Triple Threat Play
- How to Read and Beat Defenders
- Off the Ball Work

**Contact:** John Wilkins

wilkinsj4@k12tn.net

731-352-2133

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

 [Facebook.com/PureSweat](https://www.facebook.com/PureSweat)

 [Twitter.com/PureSweat](https://twitter.com/PureSweat)

 [YouTube.com/PureSweatBasketball](https://www.youtube.com/PureSweatBasketball)

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Player Name: \_\_\_\_\_  M  F

Birthdate: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Day / Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

School attending: \_\_\_\_\_

Parent / Guardian 1: \_\_\_\_\_

Day / Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Parent / Guardian 2: \_\_\_\_\_

Day / Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

For more information, or to register,  
please contact:

John Wilkins at [wilkinsj4@k12tn.net](mailto:wilkinsj4@k12tn.net) or call 731-352-2133

## **Pure Sweat Basketball Waiver:**

In enrolling in a Pure Sweat Basketball event, participant understands that he/she attending the event does so at his/her own risk. Pure Sweat Basketball and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant with his/her family in or about any programs on the premises. Participants and parents assume full responsibility for all injuries and damages which occur in or about any programs on the premises, He/She does hereby fully and forever release discharged hold harmless Pure Sweat Basketball, all associated facilities and its owner, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility. In addition, he/she agree(s) to follow the rules of conduct and play set by Pure Sweat Basketball. Failure to do so may result in suspension from participation.

I hereby authorize Pure Sweat Basketball and it's representatives to act for me according to his/her best judgment in an emergency requiring medical attention. I know of no such medical or physical problems that might affect my child's ability to safely participate in any Pure Sweat Basketball event. I will be responsible for all medical charges, along with any other charges, in connection with his/her attendance of this activity. I agree to abide by the rules and regulations set by Pure Sweat Basketball.

I have read this agreement, fully understand its terms, understand that I have given up substantial rights by signing it and have signed it freely and without inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

\_\_\_\_\_  
Printed Name of Player (Parent / Guardian if under the age of 18)

\_\_\_\_\_  
Signature of Player (Parent / Guardian if under the age of 18)      Date

Additional Notes: \_\_\_\_\_