

Lady Wolverine Basketball Camp



CAMP DATES: June 24-27, 2019

REGISTRATION DEADLINE: June 18 to guarantee correct shirt size, however, walk-ups are welcome.

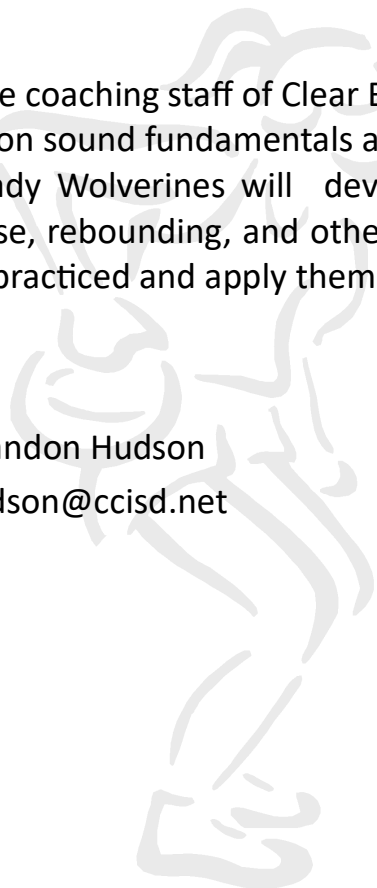
FEES: \$100.00 (Checks payable to Brandon Hudson)

TIMES: INCOMING GRADES 7TH-9TH 9:30am-12:00pm
INCOMING GRADES 3RD-6TH 1:00pm– 3:30pm

LOCATION: Clear Brook High School Gyms

CAMP DESCRIPTION: The coaching staff of Clear Brook High School will instruct the camp with emphasis on sound fundamentals and proper techniques of playing basketball. Future Lady Wolverines will develop shooting, ball handling, passing, footwork, defense, rebounding, and other essential skills. You also will get to take the skills you practiced and apply them in a controlled game setting.

QUESTIONS: Contact: Brandon Hudson
Email: bhudson@ccisd.net



2019 Lady Wolverine Basketball Camp Registration Form

Camper Name: _____

Camper Address: _____

Grade ('19-'20): _____ T-Shirt Size (Youth Sizes): S M L XL (Adult Sizes): S M L XL

Parent or Guardian Name: _____

Email Address: _____

Parent or Guardian Phone Number: _____

Alternate Phone Number: _____

Camp Selection (check the box)

| <u>Session</u> | <u>Grades</u> | <u>Time</u> | <u>Fee</u> | <u>Payment Method</u> |
|------------------------------------|---|------------------|------------|--|
| <input type="checkbox"/> Session 1 | 7 th – 9 th Grade | 9:30am – 12:00pm | \$100 | <input type="checkbox"/> Cash <input type="checkbox"/> Check |
| <input type="checkbox"/> Session 2 | 3 rd – 6 th Grade | 1:00pm – 3:30pm | \$100 | <input type="checkbox"/> Cash <input type="checkbox"/> Check |

Please read and sign below

I hereby authorize the directors of the Wolverine Basketball Camp to act for me in accordance with their judgment in any emergency requiring medical attention. I further waive and release the Wolverine Basketball Camp and its directors from liability for any damages from injuries and/or illness sustained at the Wolverine Basketball Camp. I know of no mental or physical conditions that might affect my child's ability to safely participate in the camp. I have notified the camp instructors of any physical ailments my child has experienced of which they should be aware.

Parent Name (Print)

Parent Signature

Date