

13th Annual Natick Girls' Basketball Camp



June 17th – June 21st
at Wilson Middle School Gym

9:00am – 3:00pm: Girls entering grades 3rd – 9th
Cost: \$250.00 per camper (\$260 at the door)

Come and work with the players and coaches of the **2018 – 2019 NHS team!** Campers will receive individual skills instruction, compete in skills competitions, and participate in 3 on 3 and 5 on 5 game situations. Heavy emphasis will be placed on enjoying and learning the game of basketball, improving individual skills, and learning to enjoy and appreciate controlled, competitive game situations. Instruction on fundamentals will be a cornerstone each day. All campers will receive a Natick basketball t-shirt!

Girls Director: Dan Hinnenkamp: Natick High School Varsity Coach

Contact number: 617-256-8552

Email: dhinnenkamp@natickps.org

Staff: Coach Gifford, Coach Buschenfeldt, Coach Wilson, an Athletic Trainer and NHS Players

Natick High School Basketball Summer Camp 2019
Registration Form *(please print)*

Participant's Name _____ Entering Grade _____

Age _____ Date of birth _____

Address _____

Town _____ Zip _____ Phone _____

Email Address (print clearly) _____

Current School _____

Guardian's Name _____

Best Phone Number _____

Emergency information

Should my child be taken to the hospital for emergency purposes, I hereby grant permission to the attending physician and staff to treat CAMPER _____ for anesthesia, medical, x-ray, and surgical procedures as may be deemed necessary or advisable. I understand in an emergency, whenever possible, an attempt will be made to communicate with me prior to the use of this permission.

Insurance company _____

Number _____

Signature _____

List any medications that will be taken during the camp, and/or allergies: _____

Each athlete must include (with the registration form) a recent physical and immunizations. Athletes may not participate without these documents.

I hereby pledge for myself, my heirs, executors, or administrators to waive and release all rights and claims for damages I may have against the agency. I also release the organization's agents, assigns, or officials for all injuries suffered by my child.

Signature _____ Date _____

If attending fewer than 5 days, the cost will be \$50 for the full day. Please write down which days your daughter will be attending:

Please make checks payable to: Bay State Basketball, Inc
mail to: Natick High School

Att: Dan Hinnenkamp
15 West Street
Natick, MA 01760

This camp must comply with regulations of the MA DPH and be licensed by the Local Board of Health"

Parents the right to review background check, health care, discipline policies, and grievance procedures upon request.