**Bluebird Basketball Camp**

**Registration Deadline: May 2, 2014**

**(In order to receive basketball & form shooting strap)**

**Where**: Goessel High School

**When**: May 27, 28, and 29

**Ages**: 1st through 7th Grade Boys & Girls (Grade you will finish at the end of this year)

**Time**: 1st-4th Grade- 10:00 AM - Noon

 5th – 7th Grade - 1:00 PM to 3:00 PM

**Cost**: $45 per camper **(Make checks payable Bluebird Basketball Camp)**

This is an instructional camp lead by Goessel High School Basketball Coaches. This is for kids who are serious about improving their basketball skills. If you are interested in getting better, then you don’t want to miss this camp! Camp will focus on shooting, ball handling, defense, and other fundamental skills of basketball. **Each camper will receive a Basketball and a Form Shooting Strap! (If registered by May 2nd).** Return form and payment to Coach Hoopes or Coach Lindeman by May 2, 2014.

**NOTE: Age groups, gender, and/or session times may change depending on number of campers. If these change, we will let you know by May 9th of the change (Dates will NOT change).**

**\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_**

Player Registration Form

Child Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade (2013-2014):\_\_\_\_ M or F (Circle one)

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorize the staff of this camp to act according to its best judgment in any emergency requiring medical attention and I waive and release the camp staff and Goessel USD 411 from any liability for any injuries or illness incurred while at camp. I have no knowledge of any physical impairment that would be affected by the above named camper’s participation in camp.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_