

2008 WEST WATERLOO MIDDLE SCHOOL GIRL'S BASKETBALL CAMP



***FOR GIRLS GOING INTO 6TH, 7TH, 8TH, & 9TH GRADES
HEAD COACH: DR. ANTHONY W. PAPPAS***

WEST WATERLOO MIDDLE SCHOOL GIRLS' BASKETBALL CAMP
JUNE 9th, 10th, 11th, 12th, and 13th
9:00 A.M. - NOON

FOR: GIRLS WHO WILL BE IN THE 6TH, 7TH, 8TH, OR 9TH GRADES NEXT YEAR

LOCATION: WEST HIGH SCHOOL
425 E. RIDGEWAY AVENUE, WATERLOO, IOWA

PURPOSE: FURTHER DEVELOPMENT OF BASIC BASKETBALL SKILLS THROUGH FUNDAMENTAL WORK AND INSTRUCTION AND ALSO DEVELOP TEAM FUNDAMENTALS FOR THE GAME OF BASKETBALL

COST: \$50.00 WHICH INCLUDES: CAMP T-SHIRT
A MINIMUM OF 15 HOURS OF INSTRUCTION AND PRACTICE
BASKETBALL INFORMATION IN THE FORM OF HANDOUTS
INDIVIDUAL CAMP EVALUATIONS

EQUIPMENT: PRACTICE CLOTHES AND GYM SHOES

*****TO
PROSPECTIVE CAMPERS AND PARENTS:

THIS BASKETBALL CAMP HAS A TWO-FOLD PURPOSE:
TO HELP DEVELOP AND IMPROVE THE BASKETBALL SKILLS OF YOUR DAUGHTER AND HELP OUR
OVERALL GIRLS' BASKETBALL PROGRAM IN WATERLOO.

IF YOU WISH TO HAVE YOUR DAUGHTER ATTEND OUR CAMP BUT IT IS A FINANCIAL STRAIN ON YOUR BUDGET, CONTACT ME PERSONALLY AT THE FOLLOWING NUMBER (319) 433-2704 AND SOMETHING CAN BE WORKED OUT. WE WANT YOUR DAUGHTER TO TAKE ADVANTAGE OF THIS OPPORTUNITY.

A COPY OF YOUR PHYSICAL EVALUATION FORM MUST BE PRESENTED WITH YOUR SIGNED INSURANCE WAIVER UPON REGISTRATION. NO CAMPER WILL BE ALLOWED TO PARTICIPATE IN CAMP WITHOUT A PHYSICAL EVALUATION FORM AND A SIGNED INSURANCE WAIVER. (BELOW) IF YOU HAVE ANY QUESTIONS FEEL FREE TO CALL ME. SEE YOU ON MONDAY, JUNE 11, 2007

ANTHONY W. PAPPAS, ED.D.
HEAD GIRL'S BASKETBALL COACH
WATERLOO WEST HIGH SCHOOL

FILL OUT THE FOLLOWING APPLICATION AND ENCLOSE CHECK PAYABLE TO:
WEST WATERLOO GIRL'S BASKETBALL CAMP
C/O WATERLOO WEST HIGH SCHOOL
425 E. RIDGEWAY AVE.
WATERLOO, IA 50702

NAME _____ GRADE (08-09) _____ PHONE _____

ADDRESS _____ T-SHIRT SIZE _____

PARENTS RELEASE AND INDEMNITY AGREEMENT TO: WEST WATERLOO GIRL'S BASKETBALL CAMP

We/I hereby authorize the staff of the West Waterloo Girl's Basketball camp to act for us (me) according to their best judgment in any emergency requiring medical attention and we/I hereby waive and release the camp and its staff from any and all liabilities for any injuries or illness incurred while at camp.

DATE _____ SIGNED (PARENT) _____