



HOWARD HIGH SCHOOL BASKETBALL

<http://hhsboyshoops.weebly.com/>

LIONS PRIDE BASKETBALL CAMP

Dates:

WEEK 1: (MINI-Week, ½ day) July 1st, July 2nd, July 3rd 2019
(9:00 – 12:00pm)

Cost: \$90.00

Who: Rising 4th – Rising 9th Grade **BOYS & GIRLS**

Where: Howard High School Gymnasium

Concentration on shooting, triple threat moves, movement without the ball, ball handling and reading screens.

WEEK 2: (FULL-week, Full-day) July 8th – July 12th 2019
(8:30-3:30pm)

Cost: \$265.00

Who: Rising 4th – Rising 9th Grade **BOYS**

Where: Howard High School Gymnasium

****Camp t-shirts and Before & After care are only included in the FULL DAY CAMP (Week 2).****

Mail Completed
Registration Form/Waiver
and check to:

Howard High School
Attn: **Seth Willingham**
8700 Old Annapolis Road
Ellicott City, MD 21043

Name: _____ Grade Entering Fall 2019: _____

D.O.B: _____ Parent/Guardian Names: _____

Street, City, Zip: _____

T-Shirt Size **{Select 1 Shirt Size ONLY}** (Youth Sizing) YS YM YL YXL (Adult Sizing) S M L XL XXL

Email Address: _____

Cell #: _____ Home #: _____ Work #: _____

Please indicate any special needs or health concerns: _____

Make checks payable to **Lions Pride Basketball Camp** by deadline: **July 1, 2019** (Please keep in mind registration may close early due to enrollment.)

Please select options below:

- _____ Week 1 Camp Fee \$ 90.00 (MINI Camp- ½ Day- NO t-shirt included)
- _____ Week 2 Camp Fee \$265.00 (FULL Camp **All Day**- Camp t-shirt included)
- _____ Before Care M-F \$ 10.00 M/T/W/Th/F (8:00 – 8:30) – FULL DAY CAMP ONLY
- _____ After Care M-F \$ 10.00 M/T/ W/Th/F (3:30 – 4:00) – FULL DAY CAMP ONLY

Amount Paid: \$ _____ **Check #:** _____

WAIVER: I hereby authorize the directors of the Howard High School Basketball Camp to act for me according to their best judgement in any emergency requiring medical attention, and, I waive and release the camp from any liability for any injuries sustained while at camp. I also certify that my child is medically fit to participate in this program. (Insurance is the responsibility of the parent/guardian).

Parent Signature: _____ **Date:** _____