## **IWA Team Basketball Camp**



Welcome to the 2018 Team Chargers Basketball Camp. The Isle of Wight Academy Basketball coaching staff will host their Annual Team Chargers Basketball Camp starting on June 11, 2018. Our camp is a developmental camp designed for young players. The camp will emphasize fundamentals in ball handling, dribbling, passing, footwork, individual offense and defense as well as shooting techniques. Each camper will have the learning opportunity to improve their skills through group instruction. Each daily session will go for 2 hours Monday through Friday. Each camper will receive a t-shirt for their participation in camp.

The goal of the Team Chargers Basketball Camp is to provide a complete, in-depth basketball experience emphasizing fundamentals in order to allow young players to reach their full potential. The Team Chargers Basketball Camp is a great place to improve your skills and to compete against good players. We look forward to seeing you at our camp.

## First Session: June 11, 2018 to June 15, 2018

<u>Camp Location</u>: Isle of Wight Academy Gym <u>Camp Address</u>: 17111 Courthouse Hwy, Isle of Wight VA 23397 <u>Camp Fee</u>: \$90.00 per player <u>Camp Time</u>: Girls' 12:00 – 2:00 pm, Boys 2:00 – 4 pm <u>Camp for Girl's & Boys</u>: 8<sup>th</sup> through 12th Grade.

If you are interested in improving your basketball skill level this is the basketball camp you want to attend. The coaching staff has the experience and knowledge to make you a better basketball player. I hope to see you at the camp.

For more information, contact Head Coach Chris Hooper at (757) 357-3866 or <u>chrishooper@iwacademy.com</u>

## 2018 IWA Team Basketball Camp Registration Form

Please print a hard copy of this registration form, fill out the form and send completed form to: Chris Hooper (Please make checks payable to: CHRIS HOOPER) PO Box 105 Isle of Wight VA 23397 Please call Coach Hooper at (757) 357-3866 for more information about the camps.

June 11, 2018 to June 15, 2018 @ Isle of Wight Gym (Girls 12:00 - 2:00) & (Boys 2:00 - 4:00) SESSION 1: Camp for 8<sup>th</sup> – 12<sup>th</sup> Grade Girls' and Boys .

## **REGISTRATION INFORMATION (Please print clearly.)**

NAME: `	. ,,	SESSI	ON #	
ADDRESS:		AGE:	GRADE:	
SCHOOL ATTENDING:				
CITY:	STATE:	Z	IP:	
HOME PHONE:	CELL PHO	NE:		
PARENTS/GUARDIAN:				
BASKETBALL CAMP FEE:				
CAMPERS: <b>\$90.00</b> (per session) PAID	CASH CHE	CK MONE	EY ORDER	
(Please make checks payable to: COACH				
<u> </u>	<u> </u>			
T-SHIRT:				
Adult Sizes: (Circle Size) S M	I L XL	XXL		
Youth Sizes: (Circle Size) S (6-8) M				
MEDICAL RELEASE FORM: (Please pr	int clearly)			
CAMPER NAME:	······································			
PARENT OR GUARDIAN SIGNATURE:				
PAST HEALTH PROBLEMS:	PAST/PRESENT INJURIES:			
PRESENT HEALTH PROBLEMS:	CURRENT MEDICATION:			
DRUG SENSITIVITIES:	IG SENSITIVITIES: OTHER ALLERGIES:			
HEALTH INSURANCE CARRIER:				
POLICY NUMBER:				
POLICY NUMBER: INSURANCE COMPANY ADDRESS:				
HEALTH INSURANCE PHONE NUMBER	२:			
I verify that my child has been checked by a licens	ed physician and is physically	able to participate	in the TEAM	
CHARGERS BASKETBALL CAMP. I hereby author				
to act accordingly for me to their best judgement in				
and release the TEAM CHARGERS BASKETBALI				
any injuries while at the TEAM CHARGERS BASK		, ,	,	
Parent/Guardian Signature:		Date:		

IN CASE OF AN EMERGENCY, IF PARENT OR GUARDIAN CANNOT BE REACHED, PLEASE CONTACT: NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

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