

Northville High School

Women's



Basketball

NORTHVILLE MUSTANG 2011 GIRLS BASKETBALL SUMMER CAMP

www.northvillebasketball.com

Presented by the Girls Basketball Staff
(The Boys Camp will be held July 11-14)

FOR: All Girls **Currently** in Grades 2-8 (as of the 2010-2011 school year).
DATE: Monday **June 20th** through Thursday **June 23rd** at the Northville High School Gym.
TIME: **9:00am-12:00noon**
COST: The cost for the camp is \$110.00
Please make checks payable to:

Todd Gudith
Northville High School Athletics
45700 Six Mile Road
Northville, MI 48168

OBJECTIVE: The goal of the Mustang Girls Basketball Summer Camp is to teach the fundamental skills of playing basketball. The athletes will receive instructions from the Mustang Basketball Staff and Players. The camp will include drills, games, contests, and FUN. Finally, we hope to use this event as a foundation and orientation to a successful basketball program.

No confirmations will be mailed
E-mail Questions to: GudithTo@northville.k12.mi.us
Please cut and return by June 3rd

Player Name: _____ Parent Name: _____
Address: _____ City: _____ Zip Code: _____
Phone Number: (____) _____ Current Grade: _____ School: _____
E-mail address: _____ T-shirt Size: Youth: M L Adult: S M L XL

LIABILITY WAIVER & MEDICAL COVERAGE ACKNOWLEDGE

PLEASE READ AND SIGN BELOW: I certify that it is with my full knowledge and consent that my child named above may take part in the Northville High School Summer Basketball Camp June 20-23, 2011. **I RELEASE AND HOLD HARMLESS** on behalf of my child, myself, and our representatives, the Northville Public Schools, the Northville Basketball Programs, their coaches, their volunteers and their players from liability for injuries or damages which my child may sustain while participating in this activity even if the injuries or damages are caused by the sole negligence of the Northville Public schools, the Northville Basketball Programs, their coaches, their volunteers and their players. **I UNDERSTAND I AM RESPONSIBLE** for medical coverage for my child.

Parent signature: _____ Date: _____