

Tiger Basketball Camp

June 4-June 7, 2018 Grades 2-8 [Next School Year: 18-19]

Schedule

9:00 Check-in

9:30-11:30 Skill Stations
and Team Practice

11:30-12:00 3-on-3 and
Special Games

12:00-12:30 Lunch

12:30-2:00 Games

* Campers should bring
their lunch.



TO REGISTER: Send
registration forms to:
Scott Elchert
204 S Linden St.
Jackson Center, OH.
or
Drop off in school office

PAYMENT: Please
make checks payable
to Scott Elchert

MORE INFORMATION:
Coach Elchert
H: 538-8856
W: 596-6053 ext. 107

Camp Awards
Team Champions
Special Awards
Tiger Awards



The Tiger Basketball Camp is designed for young basketball players to learn more about the game, improve their skills and have fun with their friends. The camp is **OPEN to ALL** who want to learn more about the game of basketball. Camp hours are from 9:00-2:00 each day **starting on June 4th and running thru June 7th**. The fee for the week is \$65.00 for an individual or \$90.00 for a family. Please contact Coach Elchert if you have any concerns about making payment. Each camper will receive a camp tee-shirt, and basketball and have the chance to earn additional awards. The camp staff will consist of the high school coaches, players and other qualified people. We know camp will be a great experience for all those that participate. **Go Tigers!**

cut and return bottom portion with payment

Name of Camper _____ Phone _____ Emergency Phone _____

Address _____ Zip code _____ Age _____ Grade Level (2018-19): _____

Consent to Participate:

I hereby consent to the above named individual attending Tiger Basketball Camp. I fully understand that injury is always a possibility in any athletic event. With this understanding, I release Jackson Center School District, its administrators, the Tiger Basketball Camp director and staff from any and all liability in the event of accident or injury to the above named participant. By my signature below, I warrant that my son or ward is in good physical condition, has no undisclosed medical problems, illnesses or handicaps, and is capable of full, active participation in Tiger Basketball Camp. I also represent that my son or ward has received a medical physical exam within the last year and is competent to participate in the activities of basketball camp. Lastly, in the event of an accident or illness, I authorize treatment.

(Parent or Guardian Signature) _____ Date _____

T-SHIRT SIZE (YOUTH SIZES): S (6-8) M (10-12) L 14-16)
(ADULT SIZES): S M L XL

PLEASE CIRCLE THE SIZE YOU WANT ORDERED.

**Please Return this form by May 30th
BUT we will still take registrations
the morning of June 4**