

# LEON BASKETBALL SUMMER CAMP



## --THE POWER OF THE PRIDE--

<b>Dates:</b>	<b>Session I:</b> June 18-22 <b>Session II:</b> June 25-29 <b>Session III:</b> July 9-13 <b>Session IV:</b> July 23-27
<b>Full Day:</b>	Monday – Thursday: 9:00 a.m. – 4:00 p.m. Friday: 9:00 a.m. – 12:00 p.m. Boys & Girls ages 8-14 \$185 per session (\$170 for each additional child)
<b>Half Day:</b>	Monday – Thursday: 9:00 a.m. – 12:00 p.m. <b><i>Friday - NO CAMP!</i></b> Boys & Girls ages 6-7 \$100 per session (\$ 85 for each additional child)
<p><b>*Supervision will be available at 7:45 a.m. until 5:30 p.m.</b>  <b>Camp Space is limited....Early registration is encouraged!</b>  <b>Late Fee: \$25</b> for participants registering the day of camp.  <b>Online Application: <a href="http://www.leonlionsbasketball.com">www.leonlionsbasketball.com</a></b></p>	

**PURPOSE OF THE CAMP:**  
 THE CAMP FOCUSES ON TOTAL PLAYER DEVELOPMENT. WE WILL COVER THE BASIC FUNDAMENTALS OF BASKETBALL (SHOOTING, BALL-HANDLING, DRIBBLING, PASSING, REBOUNDING, AND DEFENSE). WE WILL DISCUSS HOW TO TAKE CARE OF YOUR BODY WITH PROPER NUTRITION AND MAKE HEALTHY CHOICES. IN ADDITION, WE WILL FOCUS ON THE MENTAL ASPECTS OF THE GAME: DEVELOPING SELF-CONFIDENCE, A POSITIVE ATTITUDE AND A BETTER UNDERSTANDING OF THE GAME.

**Location:** Leon High School Gymnasium

**Food:** *Campers must provide their own lunch. Lunch is from 12:00-1:10.*

\*Cash concession will be available for purchase of drinks, snacks, pizza and hot dogs.

**Equipment:** No equipment is necessary. **Do not bring valuables.**

**Features:** Intensive individual and group instruction, daily competition and emphasis on team play. In addition, each camper will receive a camp T-shirt.

**Contact Information:** Coach Rick Davis at the Leon Boys' Basketball Office at 617-5707 or 264-9220 (mobile).

Email: [radavis21@earthlink.net](mailto:radavis21@earthlink.net)

**Payment:** Mail registration form and make check or money order payable to: Rick Davis, P.O. 12755, Tallahassee, FL 32317

-----**RETURN FORM BELOW WITH PAYMENT**-----

CAMPER'S NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE \_\_\_\_\_ SCHOOL: \_\_\_\_\_

ADDRESS & ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

SESSION ATTENDING: \_\_\_\_\_ FULL \_\_\_\_\_ HALF \_\_\_\_\_

T-SHIRT SIZE: YOUTH: M L ADULT: S M L XL XXL

EMAIL ADDRESS TO RECEIVE CONFIRMATION: \_\_\_\_\_

**Parent's Release & Indemnity Agreement:** I hereby request my child or ward to be admitted to the *Leon Basketball Summer Camp* and authorize the Camp Directors to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release the Camp from any and all liability, and I will be responsible for any and all costs of medical attention and treatment present and future. I waive and release any and all rights and claims for damages I may have against all sponsors, the Leon County School Board, Leon High School, and all employees of the *Leon Basketball Summer Camp* for any or all damages which may be sustained and suffered by my child or ward in connection with their association with, or entry into this camp, which may arise out of participating in this camp.

**PARENT NAME (PRINT):** \_\_\_\_\_ **PARENT SIGNATURE:** \_\_\_\_\_