Bulldog Girls' Basketball Camp

Who: Girls entering grades 3-8 for the 2016-17 school year
When: June 7-9
Where: Bloom-Carroll Middle School
Times: Grades 3-6 9:00– 10:30
Grades 7-8 11:30 – 1:00
Fee: $30 to be turned in with application
(all proceeds to benefit BCHS girls'basketball)

The 2016 Bulldog Girls' Basketball Camp will be held at Bloom-Carroll Middle School. For girls entering grades 3-6 next year, camp will be held from 9:00 – 10:30. For girls entering grades 7-8 next year, camp will be held from 11:30 – 1:00 at the middle school. Players will receive instruction in the fundamentals of basketball, including passing, dribbling, shooting, rebounding, and many other skills. The Bloom-Carroll Girls' Varsity Staff as well as current and past players may be present along with many of our youth coaches. The camp is coordinated by Chad Little, Head Girls' Basketball Coach at Bloom-Carroll High School.

Campers should report to camp 15 minutes prior (no earlier) to their starting time. Campers must provide their own transportation to and from camp. They will be supervised at all times and will not be permitted to leave the school without prior arrangements made by a parent. Campers will be expected to abide by various rules and regulations. Coaches reserve the right to remove any unruly campers without refund.

If you have any questions concerning camp, please contact Chad Little at Bloom-Carroll High School (614-834-6750).

See you at camp,

Coach Little

Head Coach: Chad Little

Bloom-Carroll High School
5240 Plum Road
Carroll, OH 43112

Phone: 614-834-6750
Fax: 740-756-9525
Email: clittle@bloomcarroll.org

BLOOM-CARROLL

GIRLS' BASKETBALL

CAMP

JUNE 7-9

GRADES 3-6

GRADES 7-8

Bloom-Carroll Basketball Camp Registration

Name: _____ Age: ___ Phone: _____
Address: _____
School: _____ Grade (Fall 2016): _____
T-shirt size: Youth S M L Adult S M L XL XXL
<u> Only pre-registrations received by May 31 are guaranteed a shirt!!!</u>**
Where can parents/guardians be reached if not at home?

Mother: _____ Phone: _____
Father: _____ Phone: _____

List 2 relatives or neighbors who will assume temporary care of your child:

1. Name: _____ Phone: _____
2. Name: _____ Phone: _____

Allergies: _____
Other conditions: _____

In case of an accident or serious illness, I request the school to contact me. If the school is unable to reach me, I hereby authorize the school to call the physician indicated below and follow his/her instructions. If it is impossible to contact this physician, the school may make whatever arrangements that seem necessary.

Signature of parent or guardian: _____
Local physician's name: _____
Address of physician: _____
Office phone: _____ Home phone: _____

I give my consent and approval for the participation of my daughter in the Bulldog Girls' Basketball Camp. I certify that she is physically fit to take part in all camp activities. I give my consent for medical treatment in the event of injury or illness. I will not hold the school or camp authorities responsible in case of an accident or illness.

____ Check here if you wish to <u>NOT</u> grant consent for medical treatment or transportation.

Signature of parent or guardian: _____

Please return application and $30 fee by May 31. Please make checks payable to: <u>Bloom-Carroll Schools</u> and mail to:
Bloom-Carroll High School, Attn: Chad Little
5240 Plum Road
Carroll, OH 43112