

**HORSEHEADS VARSITY "H"  
GIRLS BASKETBALL  
SUMMER CAMP**



**To Register:**

Complete the registration form below.  
Read the AUTHORIZATION FORM on the reverse  
side and sign it in the designated area, detach and  
MAIL ONLY THE REGISTRATION FORM to:

HORSEHEADS CENTRAL SCHOOL  
ATHLETIC DEPARTMENT  
ONE RAIDER LANE  
HORSEHEADS, NY 14845

**PLEASE BRING PAYMENT  
TO FIRST DAY OF CAMP**

**\$85.00 MAKE CHECKS PAYABLE TO:  
HORSEHEADS VARSITY "H" CLUB**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_

AGE \_\_\_\_\_

SCHOOL \_\_\_\_\_

GRADE FALL 2017 \_\_\_\_\_

SHIRT SIZE    YS    YM    YL  
(circle one)   AS    AM    AL    AXL



HORSEHEADS ATHLETIC OFFICE  
ONE RAIDER LANE  
HORSEHEADS, NY 14845  
607-739-5601

**HORSEHEADS  
VARSITY "H"  
GIRLS  
BASKETBALL  
CAMP**



**June 26<sup>th</sup>-June 29<sup>th</sup>**

**11:00-2:00**

Gym will be open 10:30-11:00

**Grades 4-10  
Middle School Gym**

## GENERAL CAMP INFO

**CAMP DATE:** June 26<sup>th</sup>- June 29<sup>th</sup>

**CAMP TIME:** 11:00-2:00  
(Gym opens at 10:30)

**CAMP LOCATION:** Middle School

### **EQUIPMENT REQUIRED:**

Shorts, sneakers, white athletic socks and a t-shirt

**REGISTRATION FEE: \$85.00**  
(This includes a camp T-shirt)

**Make checks payable to:**  
*Horseheads Varsity "H"*

### **CAMP DIRECTOR:**

**Andrew Scott**

Head Varsity Girls Basketball Coach at Horseheads High School for 18 years.

### **ASSISTANTS:**

**Jerry Laney**-Head JV Girls Coach at Horseheads High School.

**Mark Romanski**- Modified Girls Coach.

**Rick Gryska**-Modified Girls Coach

**Varsity Girls Basketball Players from Horseheads**- Will coach and practice with the teams at this camp

## CAMP PHILOSOPHY

This camp is designed to teach and reinforce the basic fundamentals of basketball. It will also introduce some of the more advanced techniques of the game. Each camper should leave this camp with a better understanding of the game of basketball, and take with them skills and drills that will help them improve their overall game. At the end of this camp, each girl should have the necessary information and concepts to help make her the complete basketball player. This camp will also have various games, competitions and contests to make learning basketball a fun experience.

## CAMP SCHEDULE

10:30-11:00: Free shooting / Warm-Up  
11:00-12:00: Stations (fundamental skills and drills)  
12:00-12:30: Team & Individual Competitions  
12:30-12:45: Snack break (not supplied)  
12:45-1:15: Team Practices/Skills Competitions  
1:15-2:00: Afternoon Games

## AUTHORIZATION

WE THE UNDERSIGNED PARENT OR GUARDIANS OF \_\_\_\_\_ A MINOR, DO HEREBY AUTHORIZE THE DIRECTORS OF THE HORSEHEADS VARSITY H SUMMER SPORTS CAMP PROGRAM, OR THEIR DESIGNEE, TO SELECT HOSPITAL FACILITIES AND/OR A PHYSICIAN OF THEIR CHOICE AND AUTHORIZE TREATMENT OF THE ABOVE NAMED CAMPER ON AN EMERGENCY BASIS IN THE EVENT THAT TREATMENT BECOMES NECESSARY DURING THIS SPORTS CAMP. WE HEREBY GRANT PERMISSION TO PARTICIPATE IN THE CAMP PROGRAM AND ACKNOWLEDGE THAT THE CAMPER NAMED IS PHYSICALLY FIT TO PARTICIPATE IN ALL CAMP ACTIVITIES. THE ATHLETE WILL OBEY ALL SCHOOL DISTRICT RULES AND REGULATIONS OR IS SUBJECT TO DISMISAL FROM THE PROGRAM AND BE SENT HOME IMMEDIATELY. THE SIGNATURE OF THE PARENT OR GUARDIAN ACKNOWLEDGES THEIR WILLINGNESS TO ENROLL THE CHILD IN THE HORSEHEADS VARSITY H SUMMER SPORTS CAMP PROGRAM UNDER THE CIRCUMSTANCES STATED ABOVE. THE SIGNATURE OF THE PARENT OR GUARDIAN RELIEVES THE HORSEHEADS VARSITY H CLUB, THE HORSEHEADS CENTRAL SCHOOL DISTRICT, AND THEIR DELEGATED REPRESENTATIVES FROM ANY AND ALL FINANCIAL RESPONSIBILITY.

Parent/Guardian: \_\_\_\_\_

Please print

SIGNATURE(PARENT) \_\_\_\_\_

HOME \_\_\_\_\_ WORK \_\_\_\_\_

PHYSICIAN \_\_\_\_\_

DATE SIGNED \_\_\_\_\_