Summary: Our 1 week camp is designed to teach fundamentals and teamwork in a fun and educational setting. The players learn a variety of skills while competing in fun contests and games.

BULLDOG BASKETBALL CAMP EMPHASIS:

<table>
<thead>
<tr>
<th>Ball Handling</th>
<th>Character</th>
<th>Team Work</th>
</tr>
</thead>
<tbody>
<tr>
<td>Passing</td>
<td>FT Shooting</td>
<td>Rebounding</td>
</tr>
<tr>
<td>Shooting</td>
<td>Defense</td>
<td>Being a Team Player</td>
</tr>
</tbody>
</table>

CAMP FEATURES

- Individual instruction from the High School Coaching Staff and Players
- 3 on 3 & 5 on 5 games
- The opportunity to win prizes in individual and team contests
- Each camper receives a T-Shirt
- Each camper receives a basketball
- A fun and team oriented atmosphere

Date: Monday, June 22 – Thursday, June 25

Location: Olmsted Falls Middle School

Time: 2020-2021
* Grades 3rd, 4th, 5th: 8:30 a.m. – 11:00 a.m.
* Grades 6th, 7th, & 8th: 11:30 a.m. – 2:00 p.m.

*PLEASE NOTICE THESE ARE ACCORDING TO NEXT YEAR’S GRADES

Registration
Registration is online at the Olmsted Community Center website
www.olmstedcc.com, Select Programs and Classes, Select Youth Programs

Cost: $75 May 26 and prior
$85 After May 26

**Also, we cannot guarantee a ball and t-shirt for registrations after May 26th

OLMSTED FALLS BASKETBALL


Student: ______________________________________________

2020-2021 SCHOOL YEAR GRADE: __________

Address: __________________________________________ Phone: ______________

Age: __________

T-Shirt Size: ADULT S M L XL YOUTH S M L

EMERGENCY CONTACT: In case of emergency during camp, give the name and telephone number of someone we can contact:

Name: __________________________________________ Relationship: ____________________________

Phone: ___________________________ Alternate Phone: ____________________________

I give my consent and approval for the directors of the Olmsted Falls Basketball Camp to act according to their best judgment in an emergency requiring medical attention, for my son. I also understand that I am responsible for any expenses for injuries incurred during the camp.

Signature (Parent/Guardian): _______________________________________________