

CHESTER BASKETBALL SHOOTING CAMP



JULY 18 - 22 2016

BOYS AND GIRLS

GRADES 5 – 10
(CAMPERS WELCOME FROM ALL TOWNS)

9:00 a.m. - 12:00 p.m.

BRAGG CAMPUS

COST: \$150 FOR ONE CAMPER, \$275 FOR 2 CAMPERS AND \$390 FOR 3 CAMPERS FROM THE SAME FAMILY.

The Chester Basketball Shooting Camp is designed to develop the camper's skill in the art of shooting a basketball. An emphasis is placed on learning proper technique and shooting form. Players of all ability levels will develop and refine their shooting form. Groups and drills will be designed to benefit all campers. We expect campers to learn a great deal about shooting a basketball and have lots of fun at the same time!

Jim Yankowicz – Camp Director for 20 years with 23 years of experience coaching boys and girls basketball teams. Head boys coach at BRMS for 8 years. Group III Champions 2015. Boys coach at Morris Knolls HS for 9 years and NJ Demons AAU U16 Girls coach for 2 years. Played at Colonia HS and Montclair State University. Currently teaching 8th grade math at BRMS for 26 years.

Daily Activities

- * Fundamental Shooting Instruction
- * Group Shooting Drills
- * Timed Shooting Contests
- * Games

NOTE: Campers should expect to shoot hundreds of shots daily!

Waiver Statements/Medical Coverage

All campers must have their own medical coverage. The Camp provides only excess coverage after your insurance policy has been utilized. Campers will not be allowed to play unless the following information is submitted and the form signed by the parent or the guardian of the camper.

Name of Insurance Policy & Policy Number

Statement of Disclaimer

I/We, the undersigned hereby certify that I/We am/are the parents or legal guardians of the camper. I hereby seek during the period of the Camp appropriate medical attention for the camper and for the camper to receive medical attention in the event of an accident, injury or illness. I will be responsible for any and all medical attention and treatment, except for that covered by the camp's excess medical policy.

Signature (Parent/Guardian) Date

2016 CHESTER BASKETBALL SHOOTING CAMP APPLICATION

Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Age: _____ M or F Grade Completed: _____
Parent/Guardian: _____
Phone: H _____
Emergency Number: _____
Email Address: _____

Application and Payment will be accepted through the first day of camp, though pre-registration is greatly appreciated.

**Please make check payable to:
Jim Yankowicz**

Return forms to:
Black River Middle School
Basketball Shooting Camp
c/o Jim Yankowicz
Rt. 513 – North Rd
Chester, NJ 07930