



# Northern Cass Jaguars Basketball

## 2019 Summer Camps

**For:** All boys and girls going into 3-5      **Site:** Northern Cass High School, East Gym

**Dates/Time:** Monday, June 3 - Tuesday, June 4 [12:15 – 3:30 pm]

- Instruction of age appropriate fundamentals/skills
- Camp will provide skilled coaching staff (mixture of Varsity athletes, Junior High, and Varsity coaches) showing proper technique for all positions
- Focus: ball handling, shooting, passing, and defense
- Includes individual and team competitions
- All athletes will receive a camp t-shirt

**Registration:**

Cost: **\$50.00 per student or \$80.00 per family (includes all basketball camps)**  
(Checks payable to Northern Cass Basketball)

Deadline for Registration: **Monday, May 13th**

Campers should come prepared wearing shorts, t-shirt, and basketball shoes. They are also encouraged to bring a water bottle.

Return this section with payment and registration to child's teacher, High School office, or mail to:

Kelli Trudeau  
Northern Cass School  
16021 18TH St. SE  
Hunter, ND 58048

**Please make checks payable to Northern Cass Basketball**

**For more Info: contact Kelli Trudeau (Kelli.Trudeau@northerncassschool.com)**

Please Print:

Student's Name: \_\_\_\_\_ Grade in 2019-2020: \_\_\_\_\_ Age: \_\_\_\_\_

Current Teacher: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ In case of emergency call: \_\_\_\_\_

Fee: \$50 per student or \$80 per family    check# \_\_\_\_\_ cash \_\_\_\_\_

T-Shirt Size: YS    YM    YL    AS    AM    AL    AXL    AXXL

**Release of Liability:**

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

I hereby request that you accept the enrollment of \_\_\_\_\_ in the Junior Jaguars Basketball clinic/camp. I hereby release Northern Cass High School and all their staff from any and all claims on account of any injuries which may be sustained by my son/daughter while attending this camp, and any claims which hereafter may be presented by my son/daughter as a result of any such injuries. I also certify that he/she is medically fit to participate in this activity.

Each participant is responsible for his/her own insurance.

Parent Name: (Print) \_\_\_\_\_ Parent Signature: \_\_\_\_\_