

Batesville Girls Basketball Camp

Darrick Cox
Varsity

Carey Jewell
Varsity Asst.

Elliot Tekulve
Junior Varsity

Lisa Gausman
C- Team

2017 GIRLS BASKETBALL CAMP

Batesville High School Lady's Basketball Program is proud to announce their basketball camp dates for the 2017 school year.

Grades K-2:	Sept. 25 – 28	@ Batesville Primary School	Time: 3:30 – 4:30
Grades 3-5:	Oct. 2, 3, 5, 6	@ Batesville Middle School	Time: 3:30 – 4:45
Grades 6-8:	Oct. 2, 3, 5, 6	@ Batesville Middle School	Time: 5:00 – 6:15

Cost:

\$40

Our goal for the 2017 camp will be to provide our campers the opportunity to learn fundamental drills to improve basketball skills while having fun. Our campers will work one-on-one with the coaching staff and members of the girls' basketball team. We will take a camp photo at the conclusion of each camp session, which will be posted on our Social Media Pages

(Facebook: Batesville Lady Bulldogs Basketball & Twitter: BHS Girls Basketball)

ALL campers receive a camp t-shirt & other possible prizes

Transportation: St. Louis students, please ride your normal bus to BPS or BMS. For those who are non-bus riders please ride the bus you would ride if you were bus riders. If you are unsure on the bus number please contact Ed Krause at ekrause@batesville.k12.in.us

Grades K-2: campers shall be picked up on the west side of the school (BPS gym entrance). St. Louis campers are permitted to ride the school bus to BPS or BMS with a note from their parents. Please give the note to the appropriate bus driver.



**Please detach and return with \$40 payment to
Batesville High School: Attn. Darrick Cox
One Bulldog Blvd.
Batesville, IN 47006**

Camper Name: _____ Grade: _____

Parent(s) Name: _____

Contact Number(s): _____

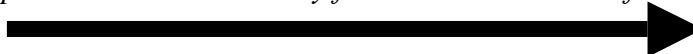
Email(s): _____

T-Shirt Size (circle one): YS YM YL S M L XL XXL

Please make all checks payable to: Batesville High School

Please return this form by: September 16, 2016

Please complete the Medical History form on the backside of this form



Student Medical History
(To be completed by parent or guardian)

I desire to enroll in the 2014 McDonald's Basketball Camp. I understand that neither Batesville Schools, McDonald's of Batesville, the directors, nor anyone connected with the camp will assume responsibility for accidents, medical, dental or other expenses incurred as the result of accidents, sustained during, or as a result of, any course of instruction given to the applicant by the camp staff.

(Circle One)

- | | | | |
|-----|----|----|--|
| Yes | No | 1. | Has had serious injuries requiring medical attention. |
| Yes | No | 2. | Is currently under a physician's care. |
| Yes | No | 3. | Currently takes medication. |
| Yes | No | 4. | Wears glasses or contact lenses. |
| Yes | No | 5. | Has had surgical operation. |
| | | 6. | Date of most recent tetanus toxoid immunization: _____ |
| | | 7. | List known allergies: _____ |

Briefly explain any "Yes" answers: _____

For any "Yes" answer, does the child have a medical release? _____

Parent/Guardian Signature: _____ Date: _____