



ST. MARY'S SPRINGS LEDGERS

2019 Girls Basketball Camp

CAMP DIRECTOR: MITCH REDIG, HEAD COACH
 mredeg@smsacademy.org / (920).960.1598 / Twitter: @LedgersGBB

DATES: Monday, June 10th - Thursday, June 13th, 2019
 Grades 1-2-3 9:30 – 10:30 AM (Baker Gym)
 Grades 4-5-6 10:45 – 12:00 PM (Hutter Gym)
 Grades 7-8-9 12:30 - 2:30 PM (Hutter Gym)

Please note grades are as of Fall 2019.

PHILOSOPHY: We have designed Ledger Camp to meet the needs of players of all ability levels. Coach Redig and his staff will utilize years of coaching experience on the grade school and high school level to help each individual improve and to teach them how to continue to improve after camp. Also, past and present Ledger players will be used to demonstrate skills and share their experiences in basketball on the high school level.

CAMP GOAL: Our goal is to provide quality instruction of the fundamentals of basketball for grade school players. The emphasis of this camp will be to help the players improve their skills for next year and future years.

CAMP FEATURES:

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|------------------------------------|--|
| Camp T-shirt | Competitive full and half court games |
| Chalk-talks by coaches and players | Shooting instruction |
| Passing and ball-handling drills | Contests and prizes |
| Team and individual defense | Individual workouts and drills for continued development |

REGISTRATION: Camp registration will be set at 50 players for each session to insure individual attention for all campers.
Registration deadline is Friday, June 7, 2019.

COST: Cost of the camp is: \$50.00 (7th – 9th) \$35.00 (4th – 5th) \$30.00 (1st – 3rd)

----- CUT AND RETURN BOTTOM PORTION -----

NAME: _____ HEIGHT: _____

GRADE '19 -'20 _____ PARENT'S NAMES _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ PARENTS WORK PHONE _____

EMAIL: _____

GRADE SCHOOL _____

(Circle one) T-shirt size: **M L (Youth Size)** **SM M L XL XXL** (Adult sizes)

Checks may be made payable to: **SMSA CAMPS** **Send to:** Greg Hoffmann
 255 County Road K
 Fond du Lac, WI 54937

PARENT'S STATEMENT: In case of an accident or emergency, I hereby authorize the camp directors to act according to their best judgment in any emergency requiring medical attention. I accept full responsibility for liability and cost of treatment.

PARENT SIGNATURE _____ DATE _____