**2019 Owensboro Catholic**

**Lady Aces Basketball Camp**

2019 All A State Champions and Back 2 Back 3rd Region Champs

The 2019 Owensboro Catholic Lady Aces Basketball Camp will be held **May 20-23**. The camp will be at the Owensboro Catholic High School Gymnasium; this camp is for any girls who will be entering the 3rd thru 8th grades next fall. The camp will be from **8:30 to 11:30 a.m.**

The camp will emphasize fundamentals while providing a safe and fun environment. Lady Aces Coaches and current Lady Aces players will help with the camp.

Each camper will receive instructions on shooting, passing, dribbling, rebounding and defense. In addition, competitive games and activities will be part of the daily activities. The goal of the camp is to help all children learn to play basketball, and to give them a lifelong sport in which to compete.

The cost of the camp is $55.00. Each additional sibling is $30. This fee includes a T-shirt and this year after camp, kids can eat lunch. Parents are welcome to stay at all times. Checks should be made out to Owensboro Catholic Lady Aces Basketball.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parents Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Next Fall:\_\_\_\_\_\_\_\_\_\_\_ Age:\_\_\_\_\_\_\_

Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Shirt Size: YOUTH S YOUTH M YOUTH L \_\_\_\_

Adult S \_\_\_\_ Adult M\_\_\_\_ Adult L \_\_\_\_ Adult XL \_\_\_\_

I understand that each camper is responsible for all medical bills incurred while at camp. I also hereby authorize the directors of the Owensboro Catholic Basketball Camp to act for me accordingly to their best judgment in any emergency requiring medical attention. I relieve all directors and staff members of the Owensboro Catholic Basketball Camp of any liability resulting in any acts dealing with my child during camp.

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_

Insurance Co. Policy No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_