



2019 Braden River Summer Basketball Camp



When: *Week #1*-June 10th-13th, *Week #2*-June 17th-20st (**Mon.-Thurs.**)
(Both Boys & Girls can participate in any or both weeks)

Where: Braden River High School Gym (SR-70 & Caruso Rd.)

Ages: & Times: students entering grades **2nd -9th grades**-8:30am-12:00pm

Camp Includes: Camp T-shirt, Daily Awards and a Basketball (if registered before 5/27/19)

Cost: \$225 for both weeks (1 week-rate \$125)

MCSB members 10% discount availableFamily Rates (5%) & Financial Aid Available
** Can access registration form at www.bradenriverbasketballcamp.webs.com **

Camp Director & Counselors:

- **Coach Jason Mickan**-Head Coach-Braden River HS
- **Coach Tom McCarthy, Jim Lacey, Robby Bennett**-Assistant & JV Coaches-BRHS
- **Braden River HS Players**-Counselors & Coaches

Philosophy: Our philosophy is to provide each player with the fundamental skills that will aid in their individual development. More importantly, we will offer a fun and positive teaching environment. Campers will improve through individual instruction, skill stations, competitions and team games. Awards are given each camp day for **“Camper of the Day”, “Hustle Award” and “Best Attitude”**.

Completed Registration Form with payment reserves camper spot

Parent Email 2019

Camper name:_____ Parent name:_____

Home phone:_____ Work:_____ Cell:_____

E-Mail address:_____ Circle weeks attending: 1st Only 2nd Only Both Weeks

Date of Birth:_____ Age:___ Sex:___ Height:_____ Weight:_____

School attending in fall:_____ Grade level entering:_____ Position:_____

Circle T-shirt size: Youth Medium Youth Large **Adult:** Small Medium Large X-large

How did you hear about us? School Flyer Road Signs Social Media Referral Other: _____

Parent/Guardian Consent

I certify that my child is in good health, and may participate in all camp activities. I acknowledge that I have appropriate medical coverage. In case of emergency, I grant permission for my child to be given emergency treatment at a local hospital, and I hereby waive and release Braden River HS, Jason Mickan and staff from any liability or injury incurred to camper while attending the camp. Camp Director has authority to dismiss campers for Drugs and alcohol or bad behavior with no refunds.

Insurance Company name: _____ Policy #: _____
(All campers must have own medical insurance coverage)

Parent or Guardian (Please print)

Parent or Guardian Signature

Mail completed application with payment to:

13824 American Prairie Place, Bradenton, FL 34211

(Make checks payable to: BR B-Ball Club, Inc.)*not to the High School*

Please contact Head Coach Jason Mickan @ mickanj@manateeschools.net with any questions.