

# North Star Charter School camper



## Lady Huskies Basketball Camp 2016

Girls entering Grades 3<sup>rd</sup>-8<sup>th</sup>

**August 11<sup>th</sup> - 13<sup>th</sup>**

9:30am - 12:30pm

\$60 per camper

### What to Bring

Basketball Shoes, Athletic Shorts, T-Shirt,  
and Water Bottle

### Location

North Star Charter School Gym

### Contact

Katie Francis (503) 975-5337

e-mail: kfrancis@northstarcharter.org

**All proceeds from the HUSKIES CAMP will benefit  
the North Star Charter School Girls basketball  
program.**

The North Star Lady Huskies CAMP is committed to  
providing and delivering a comprehensive, quality and  
unique athletic experience dedicated to:

- Responding to the unique needs of each individual

- Providing an atmosphere that is safe and fun
- Encouraging a positive learning environment
- Providing the highest quality facilities and coaches
- Helping each camper realize their full potential
- Emphasizing fundamentals, teamwork, sportsmanship and self discipline

We know that your experience at the Camp will be rewarding and enjoyable. We look forward to helping you develop your skills as well as having a great time.

### Sample Daily Schedule:

#### Warm-ups/Stretching

#### Stations

- Passing
- Dribbling
- Shooting
- Defense
- Rebounding

#### Competitions

- Individual -
  - 3 point shooting
  - free throws
  - dribbling
  - defensive
  - layups
- Team

Please detach and include this section with payment.

### Camp Registration

CAMPER Name: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMERGENCY #: \_\_\_\_\_

EMAIL: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE ENTERING (Aug 2016) \_\_\_\_\_

#### Registration Fee:

\$60 \$ \_\_\_\_\_

#### \$5 T-Shirt

Please circle size: \$ \_\_\_\_\_

Youth: S M L XL

Adult: S M L XL

Total Payment \$ \_\_\_\_\_

#### MAKE CHECKS PAYABLE TO:

North Star Athletic Association (NSAA)

Please bring checks to Room 303

North Star Charter School

839 N. Linder Road, Eagle, ID 83616

#### Medical Waiver

I hereby state my child \_\_\_\_\_ is in good health and has my permission to participate in all NS Huskies Basketball Camp activities. I authorize the staff at the camp to provide emergency first aid in the event of sickness or injury. I also give my permission for the coaches to sign for me in the event that emergency treatment, hospitalization, and/or surgery is required. I understand I am financially responsible for any medical bills incurred by my child while at the 2016 NS Huskies Basketball Camp. My signature below hereby releases the camp, camp sponsor, camp workers, camp volunteers, North Star Charter School from any and all liability and any manner of actions, suits, damages, claims, and demands on account of personal injury arising from my child's participation in the camp. Please list any medical conditions the camp volunteers should be aware of during camp.

Parent Signature: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Health Insurance - Provider: \_\_\_\_\_

Policy #: \_\_\_\_\_