



# PCS Girls Basketball

## Summer Camp

### June 12<sup>th</sup>-16<sup>th</sup>, 2017



#### WHO:

All incoming 6<sup>th</sup> – 12<sup>th</sup> grade girls and their friends who are interesting in participating in a basketball camp. Varsity coaches Kristi McCartney and Rose Istre will serve as the camp directors and will be assisted by PCS girls' basketball coaching staff, former players and invested parents.

#### WHAT:

This camp offers solid instruction in fundamental skills and tactical strategies of the game of basketball. Daily competitions, drills and individual instruction build offensive and defensive skills, personal confidence and team performance. Each day we will also consider Christian character values and a biblical perspective on athletic competition.

#### WHEN: June 12-16, 2017

- Camp is Monday through Friday, June 12-16, 2017
- Camp runs from 9am-2pm daily.
- Morning Care & Afternoon Care are available for students who need these services for an additional \$75/week. Morning Care begins at 7:30am and Afternoon Care ends at 5:30pm.
- Lunch is provided. Girls can bring a sack lunch for special dietary needs. A refrigerator is available for use.
- There will also be a time of daily devotions.

#### WHERE:

Games and instruction take place in the PCS Gym at the Westport Road Campus (8509 Westport Rd.)

#### COST:

Cost Includes: Camp Registration Fees, Daily Coaching & Instruction, T-Shirt, Water Bottle, Snack, Lunch, Summer Training Program and an unforgettable experience!

#### Camp Only Athlete

**\$75/camper – Early Bird Special - Register by May 15th**

**\$85/camper after earlybird deadline (May 15th, 2017)**

Earlybird special of \$75/camper if you register by May 15th, 2017. After that, the price increases to \$85/camper. For families with multiple campers, the first child will pay the full cost and the remaining campers will each pay \$50/camper. There is a \$200 family maximum for the camp only option.

#### Full Day Option (7:30AM – 5:30PM) Plus Camp Athlete

**\$150/camper – Early Bird Special - Register by May 15th**

**\$160/camper after earlybird deadline (May 15th, 2016)**

Earlybird special of \$150/camper if you register by May 15th, 2017. After that, the price increases to \$160/camper. For families with multiple campers, the first child will pay the full cost and the remaining campers will each pay \$100/camper. There is a \$350 family maximum for the camp plus full day option.

*Note: There are a limited number of scholarships available for campers who would like to apply. Please email Coach Kristi McCartney at [kristi.mccartney@portlandchristian.org](mailto:kristi.mccartney@portlandchristian.org) for a camp scholarship opportunity.*



**PORTLAND CHRISTIAN SCHOOL  
GIRLS BASKETBALL SUMMER CAMP  
2017 REGISTRATION FORM**



Name of Camper: \_\_\_\_\_ Age: \_\_\_\_\_

Grade (2017-2018 School Year): \_\_\_\_\_ School (if not PCS): \_\_\_\_\_

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

Morning/Afternoon Care Needed? \_\_\_\_ Yes \_\_\_\_ No

Please circle days needed: Full Week    Mon    Tue    Wed    Thur    Fri

Parent email(s): \_\_\_\_\_

Parent Daytime Phone: \_\_\_\_\_ Parent Cell Phone: \_\_\_\_\_

**Emergency Contact Name and Phone Numbers:**

<u>Name</u>	<u>Relationship</u>	<u>Phone #</u>
_____	_____	_____
_____	_____	_____

**Medical Conditions, Medications or Allergies:** \_\_\_\_\_

**Lunch:**

\_\_\_\_ My child plans to eat the camp lunch (Chick-fil-A entree, chips, fruit, veggies, cookie)

\_\_\_\_ My child needs a gluten free entree (grilled Chick-fil-A nuggets daily)

\_\_\_\_ My child plans to bring their own lunch due to dietary restrictions

**T-Shirt Size (CIRCLE)**

Adult:    S        M        L        XL        XXL

Youth:    S        M        L        XL        XXL

*Please complete back of this page and return completed registration with payment to the office (Attn: Marie Settle, Girls Basketball Camp Registration)*

# STUDENT AND PARENT/GUARDIAN ACKNOWLEDGMENT OF RISK, LIABILITY WAIVER AND CONSENT AND RELEASE AND EMERGENCY PERMISSION FORM

I give permission for \_\_\_\_\_ to attend the Portland Christian School Girls Summer Basketball Camp June 12-16, 2017. I acknowledge and agree that I understand the nature of the summer camp and that my child is qualified, in good health and in proper physical condition to participate. I understand that there are certain inherent risks and dangers associated with the camp, and I knowingly and voluntarily accept and assume responsibility for each of these risks. By signing, I agree to release, waive and discharge liability for any person injury, accident or illness (including death) and/or property loss, however caused. I further give permission to the coaches, parent volunteers and all adult chaperones of this camp to acquire medical attention for the above named child should it become necessary. I understand that I am financially responsible for any such medical treatment.

\_\_\_\_\_  
Student's Name (please print)

\_\_\_\_\_  
School

\_\_\_\_\_  
Student and Parent/Guardian Address including City, State, and Zip

\_\_\_\_\_  
Signature of student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Please list above any health concerns this student may have, including allergies (medications/others) and any medications presently being used

\_\_\_\_\_  
Name of Parent(s)/Guardian(s) who has/have custody of this student

\_\_\_\_\_  
Emergency Phone Number

\_\_\_\_\_  
Signature of Parent(s)/Guardian(s) who has/have custody of this student

\_\_\_\_\_  
Date

## **REQUIRED INSURANCE INFORMATION**

\_\_\_\_\_  
Insurance Carrier

\_\_\_\_\_  
Policy Number

## **EMERGENCY CONTACT INFORMATION**

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Relation to Student

\_\_\_\_\_  
Emergency Contact Address, including City, State and Zip

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Cell Phone