
Medical Release

Campers rightfully assume that those who are responsible for the conduct of the basketball camp have taken precautions to minimize risk of injury. Nonetheless, participation in sports involves inherent risk of injury. By the process of enrollment, campers accept and assume such risk of injury.

Parent/Guardian

I hereby give my consent for the aforementioned camper to participate in the basketball camp. If at any time it is necessary for the aforementioned camper to receive attention, I hereby give my consent to the camp personnel to secure the services of the physical or medical facility selected and to secure transportation as is deemed necessary. I will not hold the camp or its personnel responsible for any benefits and will secure adequate family insurance coverage if protection is desired.

CAMPER'S NAME:

PARENT/GUARDIAN SIGNATURE:

DATE: _____



POTEET HOOPS CAMP

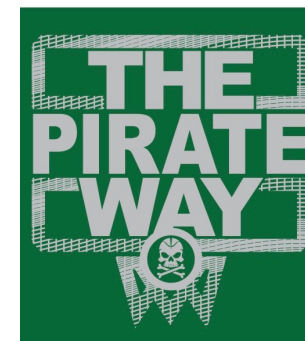
JUNE 10-12 @ POTEET

CONTACT:

COACH MCIVER

kmciver@mesquiteisd.org

(972) 882-5300 x5325



CAMP FEATURES

What to Expect

- Offensive fundamentals
- Defensive fundamentals
- Shooting
- Passing
- Screening
- Rebounding
- Individual skill work
- Post development
- Guard development
- PIRATE TEAM building
- 5 on 5 team play
- THE PIRATE WAY

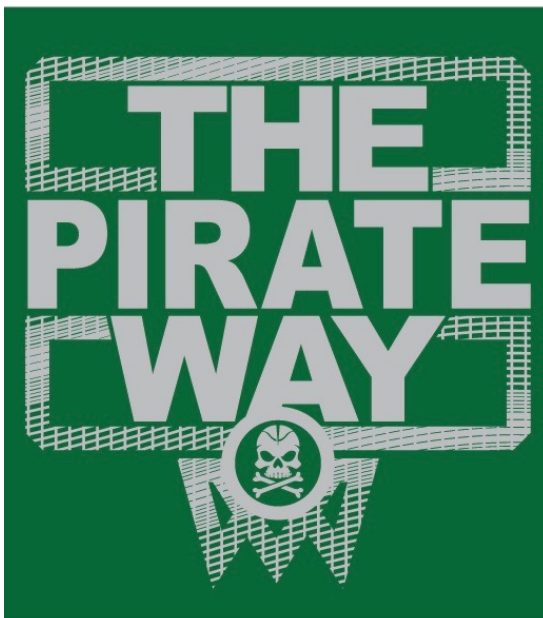
ELIGIBLE CAMPERS—

1ST to INCOMING 9th GRADERS

JUNE 10-12

10am-12

@ POTEET GYM



Player's Name: _____

Grade next school year: _____

Age: _____ T-SHIRT SIZE: _____

Parent's Name: _____

Address: _____

Home phone: _____

Cell phone: _____

Email: _____

COST—\$25

MAKE CHECKS PAYABLE TO MISD

REGISTRATION—

JUNE 10TH @ 9AM

@POTEET GYM