

Our Mission

The goal of the summer camp is to provide students the opportunity to learn how to play basketball in a fun and relaxed environment. This allows players to improve their skills and confidence. Students will get the opportunity to meet other girls within the East Greenbush Central School District.

All campers will receive a shirt and basketball.

Camp Director

Coach Greg Jette

Green Meadow

234 Schuurman Road

Castleton, NY 12033

Please make checks payable to:

EGBA

Cost

Grades 2-8 as of Fall 2019

Full Day: \$195

Half-Day: \$125 (9-12)

Multi-Child Discount: \$10 off for each additional camper.

Late Fee Registration: \$10 for any registration after 6/15/19.

Camp Expectations

Every camper will need sneakers with laces, labeled water bottle, and snack if desired. The camp will teach team play and stress player development. Proper shooting mechanics and ball handling skills to improve their game. Great chance to work with CHS staff.

Lunch

Campers can bring their own lunch or purchase pizza in cafeteria.

\$1.50 per slice ~ \$1 per drink

Blue Devils Boys & Girls Basketball Camp



July 22-26, 2019

Drop off: 8:30 a.m.

Camp: 9 a.m. – 3 p.m.

Location: Columbia High School

962 Luther Road

East Greenbush, NY 12061

Coach Greg Jette:

(518) 928-7558

Email: jettegr@egcsd.org

Application Form

Name: _____ Size Shirt:(Small) (Medium) (Large) (XLarge)

Age: _____ DOB: _____ Grade in Fall: _____

Address: _____ City: _____

Parent Name: _____ Phone: _____

Emergency Contact _____ Emergency Phone Phone: _____

Medical Consent

Health Insurance: _____ Policy Number: _____

Group Number and Insured Name: _____

Allergies: _____ Preferred Hospital: _____

Medications: _____

Physician's Name and Phone: _____

Application Form

In the event of an emergency, I authorize the staff, nurse, doctors and/or emergency personnel to administer first aid or care as necessary. I understand that neither the Blue Devils Basketball nor East Greenbush Central School District provides medical insurance for campers and that any injury requiring medical treatment and/or hospitalization will be paid for by family insurance.

Parent/Guardian Signature & Date _____

