

MEDICAL TREATMENT RELEASE

NAME: _____

DATE: _____

List any conditions that physicians should be aware of: _____

I hereby authorize any medical treatment, which may be advised or recommended by a physician. I waive and release Our Lady of Mercy Catholic School, Mustangs Hoops Camp, the staff or guests, from all rights and claims for damages or injury, or loss to person or property which may be sustained during participation in camp, whether or not damages, injury, or loss is due to negligence.

Signature of Parent/Guardian: _____

Date: _____



Our Lady of Mercy Catholic School

Mission, Objectives and Goals

It is important for young basketball enthusiasts that are at our camp age level to be trained in the basic fundamentals of basketball. Focus on fundamental skill development is important for younger players so they may establish a solid foundation to build upon to be ready to compete more effectively if and when they move on to higher levels of competitive basketball or other sports as well.

With lack of proper training, undesirable basketball habits are formed that are difficult for young ball players to fix as they begin to play competitive, organized basketball. Our camp is committed to teaching the basics needed to provide a strong platform for continued competitive basketball development for any boy or girl that either enjoys playing basketball already, or also for beginners to gain a proper sense of how the game is played in the full court setting. At the same time, we make sure to create a fun, friendly, competitive environment that helps prepare the kids for basketball or any team sports, where teamwork is an important.

We understand from decades of our own experience in both coaching as well as playing the game up through the competitive college sports level, that proper fundamental skills based basketball training in a friendly competitive environment also helps develop important life skills that carry over in to so many other aspects of life. This experience is beneficial and enjoyable to our campers whether or not they intend to continue on in developing their competitive basketball skills next year and beyond. Likewise we provide a training platform for when the camp is over that our young campers can utilize for many years to come both on their own as well as with others.

Please let us know if you have any questions to help prepare for our basketball camp.

~ Coach John Martin
Our Lady of Mercy Mustangs



MUSTANGS HOOPS CAMP

Boys & Girls



JULY 16-20, 2018

9AM-2PM

**AGES: RISING 3RD GRADE THROUGH
RISING 9TH GRADE**

*OUR LADY OF MERCY CATHOLIC SCHOOL
1730 LINK RD.
WINSTON SALEM, NC 27103
336-722-7204
EMAIL: DANIEL.DEPAULIS.PD@PEPSICO.COM*



Staff

Your child will be working with many of the best coaches in the area.

Instructors will include but are not limited to the following:

Head BMHS Boys' Basketball Coach, Josh Thompson
- 15th season as Head Coach
- 19th season coaching HS Basketball
Head BMHS Girls' Basketball Coach, Brian Robinson
- 9 consecutive Girls' State Championships
- Asst. Coach USA Women's National Team
College Basketball Official & College ACC Football Official, Art Hardin
& OLM Basketball Coaches

Objectives

To teach youth the necessary skills, techniques, and fundamentals to compete in basketball.

To teach teamwork, sportsmanship, and cooperation.

Where/When

Our Lady of Mercy Catholic School
July 16-20th 9AM - 2PM

Cost

\$ 95.00 for the week

\$ 85.00 Pre-registration by May 5th

\$ 95.00 After May 5th

2 or more athletes: \$10 discount per additional athlete

Send your completed Medical Treatment release form along with check to:

Our Lady of Mercy School Athletics
c/o: Mustangs Hoops Camp
1730 Link Rd.
Winston Salem, NC 27103

Make checks payable to OLM Athletics

Camp Enrollment

Applications will be processed on a first come, first serve basis. Registering early will help ensure your spot.

What to Bring

1. Basketball shoes.
2. Water/Gatorade.
3. Packed snack & lunch.

Medical Care

The enclosed medical treatment release form **MUST** be completed to attend.

Registration Form

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PARENT/GUARDIAN NAME:

PHONE #: _____

CELL #: _____

T-SHIRT Size: (Circle One)

Youth S M L
Adult s M L XL

Grade for 2018-2019 School Year:

___ 3 ___ 4 ___ 5

___ 6 ___ 7 ___ 8 ___ 9

