

VILLA MARIA ACADEMY HIGH SCHOOL 2011  
BASKETBALL CAMP



*Program Includes*

**Exposure to Every Phase of the Game**  
**Individualized Instruction**  
**Instructional Films and theory**  
**Valuable Guest Speakers**  
**Daily Contests and Games**  
**Weekly Player Awards**  
**Free Camp T-Shirt**

*Emphasis On*

**Shooting**  
**Foul Shooting**  
**Passing Man to Man D**  
**Zone**  
**Offense**  
**Defense**

*Staff*

**Our staff is comprised of respected collegiate and high school coaches  
as well as top college players**

*General Information*

**Dates: June 20-24, 2011**  
**Time: 9:00 a.m. to 1:00 p.m.**  
**Grades: 4<sup>th</sup>-10<sup>th</sup>**  
**Location: Villa Maria Academy High School**  
**Program Cost: \$135**

*Contact Info*

**Athletic Department**  
**610-644-2551 x1056**  
**mjmckenzie@vmahs.org**

**A non-refundable fee of \$50 will guarantee your registration in camp.**

**Any unpaid balance can be paid on or before the first day of camp.**

**Make checks payable to: VMA Athletic Adventures. Send application and check to: VMA Sports Camps,  
370 Old Lincoln Highway, Malvern, PA 19355**

*Don't Wait - Apply Today!*

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*VILLA MARIA 2011 BASKETBALL CAMP APPLICATION*

Name \_\_\_\_\_

Medical conditions that coaches should be made aware of:

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

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

Parent Email Address (please print legibly)  
\_\_\_\_\_

Current School \_\_\_\_\_

Age \_\_\_\_\_ Grade (2011-12 School Year): \_\_\_\_\_

School attending in the Fall of 2011  
\_\_\_\_\_

T-Shirt Size (adult sizes): YL/XS S M L XL

WAIVER

All Campers must have their own medical coverage. The camp provides only excess coverage after your insurance policy has been utilized. Campers will not be allowed to play unless this form is signed by the parent/guardian of the camper.

I hereby authorize the staff at Villa Maria Academy High School Basketball Camp to act for me to their best judgment in any emergency requiring medical attention and I hereby waive and release the Camp from any and all liability for any injuries or illness incurred while at camp.

\_\_\_\_\_  
Parent/Guardian Signature Date

