

June 25th – June 29th

5 Day Summer Basketball Camp

9:00am - 2:00pm

Boys & Girls

Grades: $1^{st} - 9^{th}$ (Fall 2018)

All Towns Welcome!

Staff: Elmwood Park Basketball Head Coach - Kevin Tuohey
River Dell Basketball Assistant Coach - Adam Facendola
Leonia Basketball Head Coach - Steven Herget
Elmwood Park Basketball Assistant Coach - Nico Velez

Hosting Location: Elmwood Park Memorial Middle & High School (375 River Road, Elmwood Park, NJ)

Camp Features

Shooting/Dribbling Stations
Defensive Stations
Fundamentals of Basketball
Games and Contests

Prize Shootouts

Adjustable Hoops for Young Campers

CPR/AED Certified Staff Members

Campers Grouped by Grade/Skill Level

































Pizza, Snacks, and Beverages can be purchased on site daily. Each camper is responsible for his/her lunch.

Register online at: www.summerjambballcamp.com

ΛR

Mail completed registration form (see backside) along with payment to:

Summer Jam Basketball Camp c/o Kevin Tuohey 375 River Road Elmwood Park, NJ 07407

Registration must be postmarked or submitted online by May 18th in order to receive the discounted rate.

Registration Fee:



REGISTRATION FORM

ampers Full Name: M /	F
chool:Grade:	
arent/Guardian:	
Iome Address:	
ity/State/Zip:	
mail Address:	
mergency Contact Name:	_
mergency Contact Phone Number:	
\$\$135, on or before May 18th ~ \$160, on or after May 19th \$170, walk up registration on 6/25 between 8-9am Registration must be postmarked by May 18th in order to receive the discounted rate. Make checks payable to: Summer Jam Basketball Camp	
hereby authorize the staff of Summer Jam Basketball Camp to act for me according to their best judgment in a mergency requiring medical attention for my child if I cannot be contacted. In consideration of acceptance for my child hereby for myself, my child, their heirs, executors and administrators hold harmless, waive and release any claim we mave for damages against the above mentioned, camp operators, their officials, officers, employees or representatives, heir successors or assigns for any and all injuries that may be suffered. I attest that my child is in sound condition articipate in all activities. I certify that I am the parent/guardian of child/children listed above. I further agree that the bove names parties are under no obligation to provide a physical examination or other evidence of child's fitness articipate in this program, the same being my sole responsibility.	ild, nay , or to the
arent/Guardian Signature Date	_
For questions or concerns, shoot an email to: summerjambballcamp@gmail.com	