I would like to welcome all campers to our Women’s Basketball Camp at Jacksonville State University and the Pete Mathews Coliseum. We are proud to teach these young ladies the fundamentals of basketball, along with competing in skill competitions and league games. We are here to teach the game of basketball and provide an exciting and fun atmosphere that will create great memories of Jacksonville State University. Register now and we look forward to sharing this journey with you and your family.

Annette Watts - Head Coach
TEAM CAMPS

TEAM CAMP:
Session I  June 14
Session II  June 21

$100 team fee  $10 player fee Due Before Registration
- Camps are for Varsity And JV Girls Teams
- Camp T-shirt
  - Coaches meeting at 9:15 a.m.
  - Games will begin at 10:00 a.m.
  - Receive game schedule upon arrival
  - Certified high school officials
  - Camps will consist of three games

All camps are open to any and all entrants, in accordance with NCAA legislation, limited only by number, age, grade level and/or gender.

INDIVIDUAL CAMPS

INDIVIDUAL DAY CAMP:
June 10 - 13
1st - 5th Grade 9:00 a.m. - 12:00 noon
(Registration is at 8:00 a.m.)
6th - 12th Grade 1:00 p.m. - 4:00 p.m.
(Registration is at 8:00 a.m. or 12:00 noon)

$60 Per Camper
Includes Camp T-Shirt

ATTENTION COACHES!
Please contact:
Yvette Sparks
Phone: 256-782-8066
Fax 256-782-5527
Email: Ysparks@jsu.edu

"LEARN, GROW, HAVE FUN, AND SUCCEED!!!"

For more information on JSU Basketball Camps, contact
Yvette Sparks at 256-782-8066 or by email at Ysparks@jsu.edu.

JACKSONVILLE STATE UNIVERSITY

Parental Consent Form
Parents must complete and sign this form to complete registration and for the camper to be allowed to participate in camp activities.
Mail to:
Attn: Athletic Camps
University Housing and Residence Life
Bibb Graves Hall, Room 103
700 Pelham Road North
Jacksonville, AL 36265

Camper Name (Print) _____________________________________________
Address _______________________________________________________
City/State/Zip ___________________________________________________
Age _______  Birthdate _____/_____/_____   Sex  ______________________
Grade ______ (Upcoming Year) School _______________________________
Circle your T-shirt size:   (Adult) s  m  l  Xl  XXl    (Youth)  s  m  l  Xl
Parent or Guardian (print)  __________________________________________
eergency no. day  ______________________________________________
eergency no. day (cell phone) _____________________________________
eergency no. night   ____________________________________________
email Address  __________________________________________________
Camp name (see below)  __________________________________________
Camp date ___________________________________________ __________

How did you hear about this JSU Camp:  Catalog   tv   newspaper   radio
List the names and telephone numbers of two individuals to contact in the event of emergencies (include home, work, and cell phone numbers) _________________
List any medical alerts and/or prescription medication (with doses) currently taking _______________________________________________________________

Health Insurance Provider  _________________________________________
Policy Number  __________________________________________________

I hereby give my permission for a qualified physician, athletic trainer and/or hospital emergency room to administer necessary health care in the case of an accident and/or emergency. In addition, I acknowledge that I have read and understand all information.

I hereby hold Jacksonville State University harmless for any/all injuries or damages for the above child’s participation in the camp activities. I do, for myself, my heirs, executors and administrators, release, release, release and forever discharge Jacksonville State University and all of its officers, agents and employees, acting officially or otherwise, from all claims demands, actions, or causes of action, on account of any injury, death or property damage which may occur at any time or for any cause during participation in a Jacksonville State University camp or event. It is agreed that this waiver of liability is submitted to Jacksonville State University as an inducement to include the said student in this camp or event and that this agreement is the undersigned’s free and voluntary act with full knowledge of the contents of the agreement.

Parent Signature ________________________________________Date __/___/___