

# 6th Annual



## Jr. Demon



# Basketball Camp '09

June 29th—July 2nd







**Dear Parents and Campers:** This camp is designed to give your son or daughter a chance to improve his/her fundamental skills of basketball. We will also stress the importance of things *BEYOND BASKETBALL*, such as the importance of team play, attitude, and sportsmanship. Our goal is to provide a fun, educational, and challenging experience for each camper. The DCHS women's assistant coaches along with former players will serve as co-camp directors. Camp will be held at DCHS. Please enter through the Activity Entrance on the southwest corner of the High School. We hope that you will join us for four days of basketball this summer.

Yours in Hoops,

Any further questions please contact Justin Briggs at 225-3720.

Coach Briggs  
Head Women's Basketball Coach  
Dodge City High School.

### Schedule & Details

-  **Session I** 8:00 A.M. - 10:00 A.M. Boys & Girls entering K - 2nd grade.
-  **Session II** 10:30 A.M. - 1:00 P.M. Boys & Girls entering 3rd - 6th grade.
-  All campers will receive a camp T-shirt.
-  The first 75 campers to register before **6/22/09** will receive one of our camp basketballs.
-  Cost of the camp is **\$35** per child for **Session I** , **\$40** per child for **Session II**.
-  There is a **\$5** discount for more than one child per family attending.

----- CUT & RETURN -----

Campers Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_ Grade for 09-10: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Session I Session II (please circle one)

T-Shirt Sizes: (Youth size) 10-12 14-16 (Adult Size) S M L XL **Make checks payable to Justin Briggs. Payment must accompany enrollment form.**

#### Parent Consent For Treatment

I hereby authorize the staff of Jr. Demon Basketball Camp to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive all liability for any injuries or illness incurred while at camp.

Mail registration to:  
Justin Briggs  
3011 East Barbara Lane  
Dodge City, KS 67801

Parent Signature: \_\_\_\_\_