



**June 25<sup>th</sup> – June 29<sup>th</sup>**

**5 Day Summer Basketball Camp**

9:00am - 2:00pm

**Boys & Girls**

Grades: 1<sup>st</sup> – 9<sup>th</sup> (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/Sneaker 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](http://www.summerjambballcamp.com)

OR

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:

**\$135, on or before May 18<sup>th</sup> ~ \$160, on or after May 19<sup>th</sup> ~ \$170, walk up registration on 6/25 between 8-9am**



## REGISTRATION FORM

Campers Full Name: \_\_\_\_\_ M / F

School: \_\_\_\_\_ Grade (Fall '18): \_\_\_\_ Shirt Size: YS YM YL AS AM AL AXL

Parent/Guardian: \_\_\_\_\_

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

**\$135, on or before May 18<sup>th</sup> ~ \$160, on or after May 19<sup>th</sup>**  
**\$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**

I hereby authorize the staff of Summer Jam Basketball Camp to act for me according to their best judgment in any emergency requiring medical attention for my child if I cannot be contacted. In consideration of acceptance for my child, I hereby for myself, my child, their heirs, executors and administrators hold harmless, waive and release any claim we may have for damages against the above mentioned, camp operators, their officials, officers, employees or representatives, or their successors or assigns for any and all injuries that may be suffered. I attest that my child is in sound condition to participate in all activities. I certify that I am the parent/guardian of child/children listed above. I further agree that the above names parties are under no obligation to provide a physical examination or other evidence of child's fitness to participate in this program, the same being my sole responsibility.

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

\_\_\_\_\_  
Date