

CAMP 2016
-GIRLS BASKETBALL-
CLEAR FALLS and CLEAR LAKE



Hosted at
CLEAR FALLS H.S.
JUNE 6th-9th
SESSION I

Entering 1st – 5th
Monday-Thursday
8:00 a.m. – 10:00 a.m.
Enrollment Fee: \$85.00

SESSION II
Entering 6th – 9th
Monday – Thursday
8:00 a.m. – 11:00 a.m.
Enrollment Fee: \$110.00

Extended Camp for 8th and 9th
graders only
(must have signed up for Session II)
11:00 a.m.-12:00 p.m.
\$30.00

Camp will be held at Clear Falls High
School

Osborne Basketball Camp
4380 Village Way
League City, TX. 77573

CLEAR FALLS & CLEAR LAKE HIGH SCHOOLS
2016
"GOT GAME CAMP"

**CAMP 2016
-GIRLS BASKETBALL-**



**CLEAR LAKE & CLEAR FALLS H.S.
JUNE 6th-9th
CLEAR FALLS H.S.
GYM**

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Monday-Thursday
8:00 a.m. – 10:00 a.m.
Enrollment Fee: \$85.00

SESSION II

Entering 6th – 9th
Monday – Thursday
8:00 a.m. – 11:00 a.m.
Enrollment Fee: \$110.00

Extended Camp for 8th and 9th

**graders only
(must have signed up for Session II)
11:00 a.m.-12:00 p.m.
\$30.00**

**Camp will be held at Clear Falls
High School**

**There will be a 20.00 charge at the
door for late sign-up.**

-Equipment Needed-

Each camper should wear a t-shirt,
shorts, socks and tennis shoes.
Basketballs will be provided.

-Camp Activities-

Shooting	Ball Handling
Passing drills	Defense
Rebounding	Contest
Competition	Offensive moves

This camp is designed to help student-athletes develop and improve individual skills.. Student-athletes will receive instruction on offensive and defensive techniques. The student-athletes will work on skills and implement those skills daily into game play.

The Extended camp will consist of varsity team drills, position work and series of 3 on 3 drill

-Enrollment fee includes-

**Quality Instruction
Accidental insurance coverage
Camp t-shirt
Facility rental fees**

**Camper may pay @ the door OR
Mail registration form and check to:**

**4380 Village Way
League City, TX. 77573**

**Make checks payable to:
Basketball Camp.**

**For additional information contact:
Coach Osborne @713-894-4569
sosborne@ccisd.net
Or**

**Coach Killingsworth @ 832-472-5596
killing@ccisd.net**

Osborne Girls Basketball Camp

T-shirt Size YL S M L XL

Home Phone: _____

Grade Fall 2016 _____

Number: _____

Applicant's Name: _____
Parent/Guardian's Name: _____
Home Address: _____
Emergency Name: _____
E-mail Address: _____

I hereby authorize the coaching staff of the **Osborne Basketball Camp** to act for me according to their best judgment in any emergency requiring medical attention, and hereby waive and release the camp from any liability for any injuries or illness incurred while at the camp. Each camper will be covered by a group accident insurance policy provided by the **Osborne Basketball Camp**.
Neither this organization nor this event is sponsored, endorsed or otherwise affiliated with Clear Creek ISD.

Parent/Guardian Signature: _____ Date: _____