Eastern Florida Basketball Camp Features

- Camp led by Eastern Florida State College coaching staff
- Low camper-to-coach ratio to maximize individual instruction
- Campers separated by age and playing ability
- A detailed and honest written evaluation of each camper
- Eastern Florida Hoops Academy Basketball Camp T-Shirt
- Notes of drills and games for each camper at the end

2015 Summer Basketball Camp
June 15-18, July 6-9, July 27-30
Boys Ages 8-16
Camp Objective

The main objective of the Eastern Florida State College Hoops Academy is to stress the fundamentals of basketball. They include dribbling, shooting, passing, conditioning, agility, rebounding, defense and fast break while emphasizing the importance of hard work and becoming a well-rounded person.

Each camper will come away from this experience with a better understanding of fundamentals, improved individual skills and understanding of the team concept.

Camp Day

7:45am-8:00am - Morning Drop Off
8:00am-8:15am - Morning Warm Up
8:15am-10:15am - Drill Station Work
10:15am-11:00am - Games and Contests
11:00am-12:00pm - 5 vs 5 Games

REGISTRATION FORM

Name: ____________________________________
Address: __________________________________
City: _____________________________________
State: __________  Zip: ______________________
Age: ______  Graduating Year: ________________
Home Phone: _____________________________
Email Address: ____________________________
T-Shirt Size:  YS    YM    YL     S     M    L    XL    XXL
Father Work/Cell: __________________________
Mother Work/Cell: __________________________
Email: ____________________________________

Emergency Contact:
Name: ____________________________________
Phone: ____________________________________
Dr. Name: _________________________________
Allergies: _________________________________

Camp cost is $99.

Waiver

I hereby give permission to my child to participate in the EASTERN FLORIDA HOOPS ACADEMY and acknowledge the fact that he is physically able to participate in this activity. I hereby authorize the directors and staff to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost (through family insurance or otherwise) incurred due to sickness or injury to my child. I hereby release Eastern Florida State College and its staff of all liability and waive any claim that I might have against said parties.

Insurance Company: __________________________
Policy #: ___________________________________
Signature: ___________________________________

For more information contact Chris Ronan at 321 433-5859 • Email: ronanc@easternflorida.edu

2015 Southern Conference Champions