

# **Yellow Jacket Youth Basketball Camp**

Dates: July 10<sup>th</sup> – 12<sup>th</sup> \*July 11<sup>th</sup> is last day new campers will be accepted\*

Time: 10:00am - 12:00pm \*Grades 2<sup>nd</sup>-5<sup>th</sup> \* (Boys and Girls)

1:00pm – 3:00pm \*Grades 6<sup>th</sup>-8<sup>th</sup> \* (Boys and Girls)

Location: Main Gymnasium

Camp Fee: \$30/Camper

Make Checks payable to:

**Elysian Fields HS Basketball**

**Attn: Akimba Johnson (Boys)/ Wayne Carter (Girls)**

**P.O. Box 120**

**2099 FM 451**

**Elysian Fields, TX 75642**

- **The camp will include a Certificate of completion, promote fundamentals, competitiveness, and teamwork.**

\*If you have any questions, please contact either the Head Boys or Girls Basketball Coach.\*

**Head Boys Basketball- Coach Akimba “AJ” Johnson**

**Phone Number: (903)-521-8505**

**Head Girls Basketball- Coach Wayne Carter**

**Phone Number: (830)-591-9512**



# **#JacketFast**

# Yellow Jacket Youth Basketball Camp Registration Form

Camper name: \_\_\_\_\_

Gender (Circle One): Boy or Girl

Age: \_\_\_\_\_

Grade: \_\_\_\_\_

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

City: \_\_\_\_\_

Home#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Cell#: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Consent form: I hereby authorize, give permission to and consent to my child to participate in the Elysian Fields youth basketball camp. I grant permission in case of injury or illness that my child to be treated by Elysian Fields ISD training staff. In case of medical emergency involving my child, I can be reached at the following telephone number(s).

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Phone Number: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

The undersigned hereby releases all persons involved in the Elysian Fields Youth Basketball Camp from any and all liability, claims, demands, rights of action, or causes of action for injuries. This release and waiver of liability is to be binding on my heirs, administrators, and assigns.

I have read and understood the foregoing document and understand its content and meaning.

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

**Date:** \_\_\_\_\_