SAN RAMON VALLEY HIGH SCHOOL 2022 BOYS YOUTH BASKETBALL SUMMER CAMP (GRADES 3 - 8) June 13th – July 1st



When: Monday – Friday

Breakfast Club Shooting: 8:00AM - 8:30AM

Camp: 8:30AM – 11:00AM

Location: Main Gym, Aux Gym (At SRVHS)

<u>The Breakfast Club (8:00am – 8:30am) is available to all youth campers and its purpose is</u> designed to provide additional instruction and shooting reps

CAMP EMPHASIS: Individual Skill Development, Team Development, Strength & Conditioning, Full Court Competition

THIS CAMP SERVES AS A FUNDRAISER FOR THE MEN'S BASKETBALL PROGRAM. THE FUNDS FROM THE CAMP WILL BE USED FOR GENERAL OPERATING EXPENSES FOR THE MEN'S BASKETBALL PROGRAM. THE SUMMER CAMP FUND RAISING OPPORTUNITY IS NOT INTENED FOR SUMMER EMPLOYMENT FOR COACHES

BOYS YOUTH SUMMER CAMPS ARE OPEN TO EVERYONE BETWEEN $3^{rd} - 8^{th}$ GRADE. IF YOU HAVE A YOUNGER PLAYER AND FEEL LIKE TRYING THE CAMP, PLEASE REACH OUT TO COACH BOTTEEN AT bbotteen@srvusd.net

CAMP COST = CAMP T-SHIRT, INSTRUCTION, SUPERVISION, COMPETITION

COST FOR BOYS YOUTH BASKETBALL CAMP = \$200 SIBLING DISCOUNT - HAVE SIBLINGS WHO ARE PLANNING ON ATTENDING THE CAMP? PLEASE REACH OUT TO COACH BOTTEEN AT bbotteen@srvusd.net AND LEARN ABOUT THE SIBLING DISCOUNT OPTION

PROGRAM COACHES AND VARSITY-LEVEL CANDIDATES WILL SERVE AS STAFF FOR CAMP

ALL FEES / APPLICATIONS / WAIVERS ARE DUE BY JUNE 13th, 2022

BRIAN BOTTEEN MEN'S VARSITY BASKETBALL COACH <u>BBOTTEEN@SRVUSD.NET</u> CAMP COORDINATOR: CAMP LOCATION: SAN RAMON VALLEY HIGH SCHOOL MAIN GYM, AUX GYM REGISTRATION: YOU CAN USE THE FOLLOWING LINK TO REGISTER FOR CAMP: https://sanramon.myschoolcentral.com/asbworks/(S(dbqvl2nkgiptqiv3eidks3yq))/apps/webstore/pages/WebStore.aspX YOU CAN ALSO PAY BY CHECK OR EMAIL COACH BOTTEEN IF YOU HAVE QUESTIONS! PLEASE DETATCH INFORMATION & WAIVER OF LIABILITY (AND CHECK, IF THAT IS YOUR PREFERRED PAYMENT OPTION) AND MAIL TO: SRVHS 501 DANVILLE BLVD. DANVILLE, CA 94526 C/O MEN'S BASKETBALL PROGRAM PARENT NAME PARENT SIGNATURE CAMPER NAME (PRINT) AGE GRADE GOING INTO ADDRESS CITY ZIP CODE ____ INSURANCE CARRIER POLICY NUMBER PARENT EMAIL ADDRESS PLEASE CIRCLE THE APPROPRIATE ADULT SIZE SHIRT FOR YOUR SON: S M L XXL

HOME PHONE # _____ CELL PHONE # _____

EMERGENCY CONTACT NAME EMERGENCY CONTACT #

San Ramon Valley Unified School District

EXTRA CURRICULAR ACTIVITIES

VOLUNTARY PARTICIPATION FORM

and

ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize myself/my son/daughter,

participate in the district sponsored activities of	
I understand and acknowledge that these activities, by their serious injury/illness to individuals who participate in such ac	
I understand and acknowledge that participation in these ac such is not required by the District for course credit or for co-	
I understand and acknowledge that in order to participate in agree to assume liability and responsibility for any and all pot participation in such activities.	
I understand, acknowledge, and agree that the San Ramo employees, officers, agents, or volunteers shall not be liable for my son/daughter which is incident to and/or associated with this activity and I voluntarily assume all risk, known or unleven if caused in whole or in part by the action, inaction, of fullest extent allowed by law.	or any injury/illness suffered by myself, h preparing for and/or participating in known, of injuries, howsoever caused,
The undersigned agrees to defend, indemnify and hold has School District, its Board of Trustees, officers, agents and e from and against all costs, losses, claims, demands, suits, actio legal and attorney fees, arising from personal or bodily in regardless of and however caused, brought or recovered again any reason from or during or be alleged to be caused by District's facilities, furniture or equipment, or nature of activity	mployees, individually and collectively, ons, payments and judgments, including juries, property damage or otherwise, not any of the above that may arise for the undersigned's (use/occupancy of
I acknowledge that the above named participant is in good he activities, including activities which are strenuous in nature.	ealth, and fully able to participate in the
I have carefully read this VOLUNTARY ACTIVITIES participant and that I understand and agree to its terms.	PARTICIPATION FORM and as a
Parent/Guardian	Date
Student Signature	Date

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file before a participant will be allowed to participate in the above extra-curricular activities.

Reviewed: March 2014