

Blazers Basketball Camp



Youth Basketball Summer Day Camp 2019

Superior Middle School

Monday July 1st – Friday July 5th

9:00 am to 4:00 pm (Drop-off after 8:30 am)

Friday only until Noon. Supervised Lunch 12:00 noon – 1:30 pm



Take your game to the next level! Learn new skills and improve on the basics!

Gain self-confidence with high level coaching!

Make new friends and have Lots of Fun!

For beginning, intermediate and advanced players looking to develop and refine their fundamental basketball skills.

Age Categories

Group 1 - Grade 2-6 (next year)

Group 2 –Grade 7-9 (next year)

Camp will include the following fundamentals:

- Ball Handling
- Dribbling
- Shooting Technique
- Lay-up skills
- Defensive Skills
- Footwork
- Spacing and Movement

Daily Awards will include

- Camper of the Day
- Hustle of the Day
- Play of the day

Camp Awards will include

- Camp Female MVP
- Camp Male MVP
- Most Improved Player
- Coach Award

Cost: \$175.00 / per camper before May 20th \$200 / per camper after May 20th.

\$25.00 discount per sibling

*******Camp t-shirt included*******

Questions??? Contact Dave Chaisson email – david.chaisson@icloud.com

General Information:

Each camper must have a water bottle

Please wear basketball shoes, t-shirt and shorts

Campers are grouped by age and ability

Campers will all participate in the same drills and development activities

All campers will play in scrimmage games each day

Each camper will receive a BLAZERS B-ball Camp T-Shirt

There will be a 5 vs 5, 3 vs 3 and a free throw competition winners

Awards and Prizes will be handed out at the Awards Ceremony, which will be on Friday at 11:30 am.
Parents and Friends are invited!

Registration Deadline is Friday June 7th (first 32 accepted)

Blazers Basketball Camp Registration

Camper Name: _____

Camper Age: _____ Camper Grade (next year): _____

T-shirt Size: Youth S M L Adult: S M

Parent Name: _____ Email Address: _____

Address: _____

City: _____ Postal Code: _____

Phone Home: _____ Phone Cell: _____ Phone Emergency _____

Medical Issues: _____

Medicare Number: _____

Make Cheques payable to : Bathurst Minor Basketball

Superior Middle School cc. David Chaisson
560 Duke Street
Bathurst New Brunswick
E2A 2X5

As a parent, I will not hold the instructors nor the school district responsible of any injuries to my child incurred during the normal performance related to camp training. I permit photos of my child to be posted on BMBA websites.

Parent's / Guardians Signature