

Randi Perkins "Shoot For Your Dreams" 2010 Mustang Girl's Basketball Camp

For Information: www.marquettemustanghoops.com
Perkins; Kids Helping Kids: www.khklimited.com

TIMES: 8:30 - 11:00 Grades 3rd, 4th, 5th
11:30 - 2:00 Grades 6th, 7th, 8th
2:30 - 5:00 Grades 9th, 10th, 11th, 12th

Grade level refers to grade student will be entering in the fall

DATES: June 1-4, 2010

FEES: \$80.00 for each participant
(\$70.00 each if there are 2 or more participants from the same family)

STAFF: Scott Cleer, Girls' Head Coach, Marquette High;
Tim Bowdern, Assistant Coach, Marquette High
Michelle Spencer, Assistant Coach, Marquette High
Former players from Marquette High
The Perkins family

(T-Shirts, Photos & Awards Given to All Participants)

The basketball camp will concentrate on basketball fundamentals. Sessions will stress shooting, dribbling, passing, rebounding and fundamental offensive and defensive moves. Offensive and defensive team play will be taught in grades 6th through varsity.

REGISTRATION REQUIREMENTS(Grades 9-12).

Team Camp will be for Marquette students. Student **MUST** enroll in the basketball camp where they attend, or will attend high school. Private school students and non-resident students are **NOT** eligible for enrollment in accordance with MSHSAA rules. Be sure to indicate High School attendance in area below. Students entering grades 3-8 can attend camp regardless of the attendance area.

WHAT TO WEAR:

T-shirt, gym shorts and basketball shoes. Monogram T-shirts will be provided as part of the tuition costs. Please indicate the T-shirt size on the registration form.

(MEN'S SIZES: S - M - L - XL)

FILL OUT AND MAIL WITH CHECK PAYABLE TO SCOTT CLEER:

Marquette High School - 2351 CLARKSON ROAD - CHESTERFIELD, MO 63017

ATTENTION: SCOTT CLEER

REGISTRATION FORM

Date _____

Miss _____

Please Print Last

First

Address _____

Number & Street

City

Zip

Phone _____

Home

Business

E-Mail Address _____

T-shirt Size _____ Grade Next Fall _____ Cash _____ Check _____

School Presently Attending _____

To be completed for Sports Camp and Clinics. My child is adequately covered by an accident policy for athletic injuries. _____ YES _____ NO