

Ferndale Golden Eagles Boys Basketball Youth Summer Camp 2016



June 14th-16th

For Boys Entering 4th-8th grade

\$55 if register by June 1st \$70 After

**All players receive a t-shirt and First 70 registered
receive a nylon draw string Back pack**

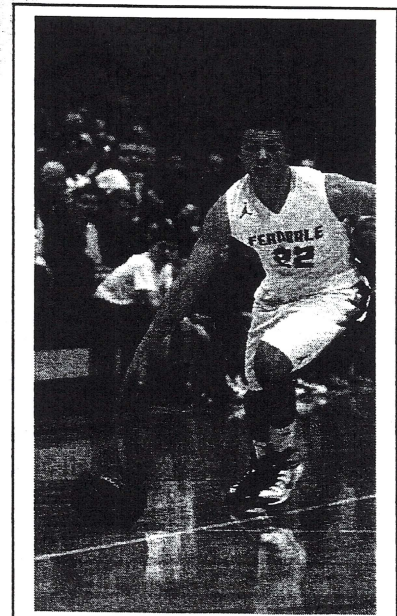
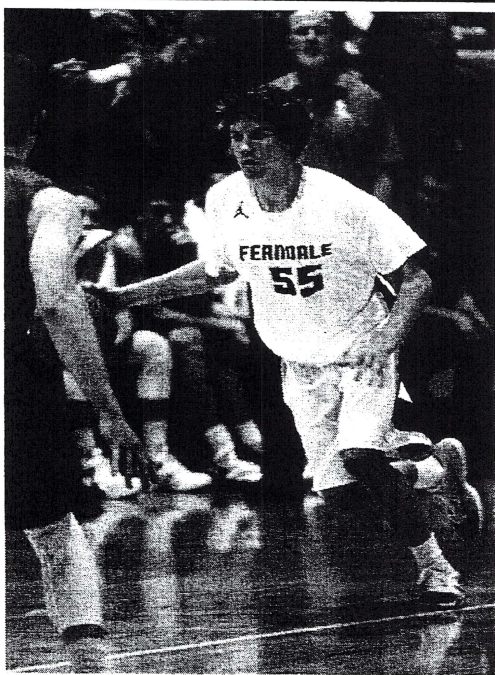
Sign up on line or at the Ferndale ASB office SEE BACK SIDE/PAGE 2 FOR REGISTRATION INFO

See brochure or online at <http://ferndalesd.org/fhs/athletics/boys-basketball/> for more details

Learn the Ferndale Way

- **Dribble Drive Attack**
- **Improved Shooting**
- **Individual moves**
- **Competitive drills**
- **Team leadership**

**Ferndale Basketball:
Playing with Passion
With Purpose and
For Each Other**



Ferndale Golden Eagles Boys

Basketball Youth Summer Camp 2016

June 14th-16th

For Boys Entering Grades 4th-8th



\$55 if register by June 1st; \$70 if you register after June 1st

All players receive a t-shirt and the first 70 registered players receive a nylon drawstring cinch pack

Sign up on line or at the Ferndale High School ASB office

See brochure or online at <http://ferndalesd.org/fhs/athletics/boys-basketball/> for more details

Please detach bottom section and mail in or return to Ferndale ASB office Attn Brandi

FHS Camp Registration

Please make checks out to FHS: only checks or Cash are accepted

Please return by June 1st 2016 to FHS ASB office attention Brandi or Mail to FHS PO box 428 Ferndale, WA 98248

Name of player: _____ Name of Parent/Guardian: _____

Address: _____ City: _____

Emergency Contact phone #: _____ Email: _____

Players age: _____ Grade entering in fall _____

Shirt size(circle one) YS YM YL YXL AS AM AL

Cost \$55 per camper if registration is before June 1st

Cost \$70 per camper if registration is after June 1st

Please complete this portion of the panel and detach and return to the Ferndale High School ASB office or mail this form to the school along with a check to FHS attention Brandi PO Box 428, Ferndale, WA 98248

The following release must be signed by the parent or guardian.

I hereby authorize the staff of said camp to act in my absence in case of illness or injury involving my child. Neither my child nor I will hold this camp, camp staff, or the Ferndale School District liable for injuries, illness or expenses incurred while my child is at camp. Medical insurance and expenses is the responsibility of the participant.

Parent/Guardian Name (circle one)

Print Name: _____ Signature _____

For more information Contact Jason Owens at 360-815-6873 or email at jasono@dewaardandbode.com