



# ST EPHREM

**2ND ANNUAL SUMMER BASKETBALL CAMP  
 FOR BOYS AND GIRLS  
 AT THE NEW MARIAN CENTER  
 UNDER THE DIRECTION OF DAN WILLIAMS  
 FORMER COLLEGE COACH  
 BOYS AND GIRLS AGES 8 TO 15  
 AUGUST 2<sup>ND</sup> TO AUGUST 6<sup>TH</sup>  
 9AM UNTIL 2PM (FRI 9-12)**



**COST OF CAMP ONLY \$125.00**  
 TEAM RATE (7 OR MORE PLAYERS) \$100.00 PER PLAYER

CAMPERS MUST BRING LUNCH/AIR CONDITIONED FACILITY  
 PLEASE FILL OUT THE APPLICATION BELOW AND MAIL CHECKS TO

ST EPHREM CYO  
 P.O. BOX 292  
 BENSLEM PA. 19020

NAME OF CAMPER \_\_\_\_\_ GRADE IN SEPT 2010 \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_

SHIRT INFO (CIRCLE ONE) YM YL YXL AS AM AL AXL AXXL

TEAM AFFILIATION FOR TEAM RATE \_\_\_\_\_

PARENTS INFO NAME \_\_\_\_\_ CELL \_\_\_\_\_

(OVER)



## **CAMP FEATURES**

STATION DRILLS  
FOOTWORK  
DEFENSIVE QUICKNESS  
MOVING WITHOUT THE BALL  
TRIPLE THREAT POSITON TECHNIQUES  
SHOOTING  
LEAGUE GAMES



**SPECIAL FEATURE: HOW TO BECOME A SUCCESSFUL  
FOUL SHOOTER  
INDIVIDUAL AND TEAM AWARDS**

**TEACHING IS OUR TOP PRIORITY**

**REGISTER EARLY SPACE IS LIMITED**

**DIRECT ANY QUESTIONS TO:**

**[stephremballcamp@yahoo.com](mailto:stephremballcamp@yahoo.com)**

PERMISSION AUTHORIZATION AND RELEASE

I, THE PARENT OR GUARDIAN OF \_\_\_\_\_, SUBMIT THAT MY SON/DAUGHTER IS PERMITTED TO AND PHYSICALLY FIT TO PARTICIPATE IN STRENOUS PHYSICAL ACTIVITY, AND WAIVE THE ST. EPHREM CAMP OF ANY RESPONSIBILITIES FOR INJURY OR ILLNESS TO MY SON/DAUGHTER.

\_\_\_\_\_  
Parent or Guardian signature

\_\_\_\_\_  
Date