

# SPS Basketball Skills Camp

Presented by: Scott Giammarco



St. Paul's Catholic School Gymnasium  
June 24-27

**Boys and Girls**  
**Grades 1st-4th 9:00am-11:30pm**  
**Grades 5th-8th 1:00-3:30**

Scott Giammarco, a Varsity-level coach of 18 years, is conducting a skills camp for boys and girls entering grades 1-8. Each camper will have the opportunity to learn fundamental basketball skills including, ball-handling, shooting mechanics, footwork, passing, and competitive drills and games. All participants will receive a camp t-shirt and individualized instruction.

The registration fee is \$55.00 per participant. You may register in advance by completing this registration form and returning to the main office at **St Paul School Attn: Scott Giammarco by May 30, 2019**, or by mailing your registration to: **Scott Giammarco at 8813 Leyland Ave NW North Canton OH 44720**.

**Registration Form: 9-11:30 (1st-4th)---\$55**

**1-3:30 (5th-8th)---\$55**

Athlete name:

2018-19 Grade (next year)

Address:

Home Phone:

Parents name:

Work #

Cell #

Emergency contact:

Relationship:

Contact #

**Student t-shirt size (Youth/Adult Sizes):**  **Small**  **Medium**  **Large**  **Extra Large**

**\*please note youth on form**

### **Waiver of Liability**

I, as a parent or guardian, hereby give permission for my child to participate in the St.Paul School Basketball Skills Camp at SPS School scheduled for June 24-27th. I acknowledge that s/he is physically able to participate in all camp activities that have been described in the information brochure. I hereby release and forever discharge Scott Giammarco, St Paul School, Diocese of Youngstown, its employees, agents and contractors, in both their public and private capacities from any/all liability, claims, suits, damages or cause(s) of action whatsoever for any property damage or personal injury sustained by my child that may arise in connection with any camp activities. I also give my permission for any emergency medical care that may be required as a result of any injury.

Parent's Signature

Date

**Payment Information: \$55.00 (Please make checks payable to: Scott Giammarco)**