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Name: _____

Home Address: _____

City: _____ State: _____

Zipcode: _____ Date of Birth: _____

Home Phone: _____

Primary Care Physician: _____

Office Phone Number: _____

Is camper currently being treated by a physician for injury or illness?
If yes, explain: _____

List Medical Conditions: _____

List medications currently taken: _____

List allergies: _____

Policy Holder's Name: _____

Address: _____

City/State/Zip: _____

Home Phone: _____

Cell Phone: _____

Group #: _____

Plan #: _____

Contract #: _____

Policy#: _____

Relationship to Camper: _____

Emergency #: _____

As the parent/guardian of the camper listed above I hereby agree to the following as a condition of _____'s participation in the GVSU summer camp program and related services.

I give my permission to GVSU, St. Mary's Hospital, Spectrum Health Care System, North Ottawa Community Hospital, Metropolitan Health Care System or other health care providers to provide, seek, obtain, or approve any routine, necessary, or emergency health care during the camper's involvement in the GVSU summer camp program. I understand that this authorization is given in advance of any specific diagnosis, or treatment or medical care being required and is to serve as specific consent to any and all such diagnosis, treatment or hospital care which may be deemed advisable. I understand my rights under the Health Insurance Portability and Accountability Act (HIPPA) and authorize GVSU to release information as necessary for managing summer camp health care.

I attest that a physician has examined the camper in the past twelve months and he/she was found to be in good health. I attest that currently there is no medical reason for the camper not to participate in the strenuous physical activities of the sports camp program.

I acknowledge that participation in sports camp and related activities involves assumed and inherent risk of personal injury. I assume such risk on behalf of the camper and give my permission to the camper to participate in all sports camp activities. I release and agree to hold harmless GVSU, its Board of Trustees, students and employees from all claims, actions, damages, and liabilities for personal injury or damage relating to or arising out of any sports camp activity except where the injury or damage is caused by the gross negligence of the university's employees. I understand that the camper will be subject to the rules and regulations of the GVSU sports camp. I understand that any person who repeatedly disobeys camp policies or procedures will be immediately expelled from camp. GVSU is not responsible for lost or stolen property.

Signature of Parent or Guardian

Date

Grand Valley State University
 Women's Basketball
 1 Campus Drive, 163 FH
 Allendale, MI 49401



**2008 INDIVIDUAL
 GIRLS BASKETBALL CAMPS**



**Premier Player
 Camp
 June 17th - 19th**

**Scoring Day
 Camp
 July 24th**

**Shooting Day
 Camp
 July 25th**

**Ball
 Handling Day
 Camp
 July 26th**



GVSU Women's Basketball

“At Grand Valley we have built an amazing tradition and our camps are part of that. I think the kids who attend our camps get a great overall experience both on and off the court, just as our players do at Grand Valley. We have a fantastic staff and the interaction with our players is a great aspect of the camp experience.”

Coach Burgess



COACHING STAFF

Janel Burgess-Head Coach

Janel Burgess recently completed her first season as Head Coach here at Grand Valley. She has nine years of college coaching experience including four years at Michigan State University under Joanne P. McCallie, where the Spartans made back-to-back NCAA appearances. Prior to her arrival here she spent time at Missouri State where she guided the Lady Bears to a 2005 WNIT Championship. Her wealth of knowledge and passion for the game will be reflected in all of our camps and will be extremely beneficial to any young lady who signs up.

A four-year starter at Iowa State, Burgess was a two-time All-Big 12 selection and led the Cyclones to two NCAA Tournament appearances.

Janel, a native of Millersburg, Iowa, resides in Allendale with husband, Tim, and their son, Eddie (4).



Jill VanderEnde—Assistant Coach

Jill VanderEnde also brings nine years of college coaching experience to the Laker program. She joined the Laker staff this past season after spending previous seasons at Eastern Michigan, Central Michigan, and The University of Findlay. Prior to Eastern Michigan, VanderEnde spent five years as the top assistant coach at Central Michigan University. Here she helped guide The Chippewa's 2005-06 team to its first winning season since 1992-93.

Before coaching at Central Michigan, VanderEnde was an assistant coach at the University of Findlay where she helped lead the team to an NAIA Final Four appearance and a GLIAC South Division title. VanderEnde works primarily with the guards.

Coach V has a tremendous amount of devotion to developing young ladies on and off the court. Her ability to impact each camper will allow skill development and enhance their performance.

A Grand Rapids native, VanderEnde attended West Catholic High School where she received all-state, all-area, and all-city honors in basketball before attending Lake Superior State University where she was a four-year standout guard earning all-GLIAC honors. She currently resides in Walker, MI.

Premier Player Camp

June 17 - 19, 2008

A serious, no frills camp featuring some of the best talent in the state. Varsity level players will learn individual skills as well as team concepts in a highly competitive setting. It is recommended all players have previous varsity experience or expect to play varsity basketball this season.

Each player will receive a T-shirt.

Costs \$225 per resident (all meals and room)
\$150 per commuter (no meals or room)

Registration is from 11:30 - 1:00 pm on the 16th

Camp starts at 1:30 pm on the 16th

Camp ends at Noon on the 18th

Individual Day Camps

Cost \$65 each day **Recommended age** 5th - 12th grade

Registration is from 8:00 - 8:50 am each day

Day Camp Sessions: 9:00 am - 12:00 pm and 1:00 pm - 4:00 pm

Each player will receive a camp T-shirt and an outdoor ball.

No lunch will be served so campers are encouraged to bring a lunch or snack.

Scoring Day Camp

July 24, 2008

Players will be instructed on how to convert from the perimeter, post, and in transition. This camp will emphasize both individual scoring moves and techniques which will put players in great scoring position.

Shooting Day Camp

July 25, 2008

This camp will focus on all the fundamentals of a perfect shot! We break down the shot mechanics which include footwork, timing, hand position and release. Each player will receive proper instruction and repetition.

Ball Handling Day Camp

July 26, 2008

Players will learn all the basics of being a better player with the ball. We will focus on footwork, balance, dribbling, passing and taking the ball to the basket one-on-one. These fundamentals are essential to becoming a complete player.

Payment and Registration

These camps fill up fast, all applicants accepted on a first come first serve basis. Camp numbers will be limited to ensure individual attention. Complete the registration form to the right and mail to the address listed in this brochure. Once we have your application we will send you a confirmation **via EMAIL** with instructions and logistics of the camp(s) registered for attendance. If you have any questions, please feel free to contact us at (616) 331 - 3526.

Refund Policy

A \$50 non-refundable deposit will be required with registration. Students leaving the school before the ending day and time will not receive a refund unless they are forced to leave early for medical reasons.

REGISTRATION INFORMATION

Premier Player Camp

- _____ Resident - \$225 (meals and room)
- _____ Commuter - \$150 (no meals or room)
- _____ Scoring Camp - \$65
- _____ Shooting Camp - \$65
- _____ Ball Handling Camp - \$65

Name: _____

Address: _____

City: _____ State: _____

Zipcode: _____ Phone: _____

Email: _____

High School: _____

Age: _____ Graduation Year: _____

Method of Payment

- Check
- Visa
- Mastercard

Card Number _____ EXP. _____

Signature of Card Holder _____

Make checks payable to Grand Valley State University

Mail to:

GVSU Women's Basketball

I Campus Dr., I63 FH

Allendale, MI 49401

Phone: (616) 331 - 3526

Email: vanderej@gvsu.edu