

## Boys' Basketball Camps



*Summer 2010*  
**Elite Camp: June 5-6**  
**Day Camp I: June 28-July 1**  
**Mini Spiders: July 12-15**  
**Day Camp II: August 2-5**

**UNIVERSITY OF RICHMOND**



University of Richmond  
 Event Registration Specialist  
 University Services  
 Physical Plant Suite B  
 Richmond, VA 23173



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### RICHMOND BASKETBALL CAMP REGISTRATION FORM

**SELECT DESIRED CAMP(S): Indicate your selection by checking the box(es)**

Deposit and Registration Forms Should Be Submitted One Week Prior To Camp. A Deposit Will Be Required For Each Camp Selected

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> <b>ELITE CAMP</b>                                    | <input type="checkbox"/> <b>DAY CAMP I</b>             | <input type="checkbox"/> <b>MINI SPIDERS</b>       | <input type="checkbox"/> <b>DAY CAMP II</b>        |
| June 5-June 6 (Overnight)<br>10am-10pm, 9am-3pm<br>Ages 14-18<br>Price: \$125 | June 28-July 1<br>9am-4pm<br>Ages 8-17<br>Price: \$250 | July 12-15<br>9am-1pm<br>Ages 6-10<br>Price: \$200 | August 2-5<br>9am-4pm<br>Ages 8-17<br>Price: \$250 |

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Shirt Size \_\_\_\_\_  
 Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Campers Age On June 1, 2010 \_\_\_\_\_  
 Email Address \_\_\_\_\_ Parent's Signature \_\_\_\_\_

Register online at [RichmondSpiders.com](http://RichmondSpiders.com) under the "Camps" tab. Mailed applications must be accompanied by a Non-Refundable deposit of \$100. Remaining balance will be due by the first day of camp. Checks should be made payable to "UR Boys' Basketball Camp" and mailed to: Event Registration Specialist, University Services, Physical Plant Suite B, Richmond, VA 23173  
**Questions, please contact Peter Thomas at (804) 289-8392 or [peter.thomas@richmond.edu](mailto:peter.thomas@richmond.edu)**

# 2010 Richmond Boys' Basketball Camps

Dear Parents,



I would like to take this opportunity to invite you to the 2010 University of Richmond Boys' Basketball Camp. My staff and I are excited to direct our sixth summer of basketball camps at the University of Richmond.

At our camp we emphasize the importance of individual skills to all campers. We try to assist each camper in developing his overall game for the week of camp, and give him the groundwork to improve his game throughout the summer. Our campers drill and compete within their age groups in various skill competitions such as dribbling, passing, shooting and defense.

Beyond individual skill development, we emphasize the importance of team play to all campers. Each coach will implement a camp offense that will require the campers to utilize their skills while learning to play together. The offense will require passing, cutting and screening by every member of the team to help each player understand the value of team play.

I do hope that you will take this opportunity to attend this year's camp. We have assembled an outstanding camp coaching staff to teach your son the skills and fundamentals of basketball and the value of teamwork.

Sincerely,

Chris Mooney

**ELITE CAMP**  
**June 5-6**  
 10<sup>am</sup>-10<sup>pm</sup>, 9<sup>am</sup>-3<sup>pm</sup>  
**Ages 14-18**  
**Price: \$125**

**DAY CAMP I**  
**June 28-July 1**  
 9<sup>am</sup>-4<sup>pm</sup>  
**Ages 8-17**  
**Price: \$250**



**MINI SPIDERS**  
**July 12-15**  
 9<sup>am</sup>-1<sup>pm</sup>  
**Ages 6-10**  
**Price: \$200**

**DAY CAMP II**  
**August 2-5**  
 9<sup>am</sup>-4<sup>pm</sup>  
**Ages 8-17**  
**Price: \$250**

Each camp will include...

- *Officiated 5 vs 5 Games*
- *3 on 3 & 1 on 1 Games*
- *Hot Shot Competition*
- *Free Throw Competition*
- *Variety of Other Games*



Campers will play in the Robins Center (above) as well as the new Weinstein Center (top left). Meals will be served in the newly renovated Heilman Dining Center (right).



## University of Richmond Basketball Camp Waiver/Medical Release Form

It is the responsibility of the camper's parent or guardian to ensure that the camper is healthy and has no physical problems that would prevent his participation in all camp activities. In the case that a major medical problem arises, an attempt will be made to notify you by telephone. In the event you cannot be reached, the medical treatment as deemed necessary by a licensed physician will be administered. In addition, I agree to indemnify the Trustees of the University of Richmond, and all of their officers, employees, and agents, against all claims, or liability whatsoever arising from this agreement or the performance of this agreement and from all claims on the account of any injuries which may be sustained by your child while traveling to, participating in and returning from any camp activities. I understand that responsibility for primary medical insurance coverage rests with the camper.

Camper's Name: \_\_\_\_\_ Date: \_\_\_\_\_

List any allergies to medicines: \_\_\_\_\_

List any conditions that physicians should know about: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_

Policy No.: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Emergency Phone Numbers (Day): \_\_\_\_\_ (Night): \_\_\_\_\_