

**ATCHISON COUNTY BOYS  
BASKETBALL 2007 SUMMER CAMP**  
July 16<sup>th</sup> – 19<sup>th</sup> – Incoming 4<sup>th</sup>, 5<sup>th</sup> & 6<sup>th</sup> Grade (1 p.m. – 3 p.m.)  
July 16<sup>th</sup> – 19<sup>th</sup> – Incoming 7<sup>th</sup> & 8<sup>th</sup> Grade (3 p.m. – 5 p.m.)  
ACCHS GYM



**“Fulfill the Dream”**

Dear Parents and Campers,

The emphasis of this camp is to give your son a chance to improve his fundamental skills in the game of basketball. The basic skills will be stressed in drills while team play is incorporated to begin offensive and defensive strategies. Camp will serve as an excellent chance for the athletes to start learning what is expected of them. The camp staff will consist of ACCHS basketball coaches. Our goal is to provide a fun and enjoyable experience for your athlete.

Sincerely,

John Wetig, ACCHS Head Boys Basketball Coach

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\*Please cut here and return bottom portion

**COST \$25.00 – MAKE CHECKS PAYABLE TO JOHN WETIG**

NAME: \_\_\_\_\_

GRADE (2007-08 SCHOOL YEAR – CIRCLE ONE): 4 5 6 7 8

HOME PHONE NUMBER: \_\_\_\_\_

EMERGENCY PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PLEASE INDICATE SHIRT SIZE PREFERENCE (CIRCLE ONE):

ADULT- S M L XL XXL      YOUTH- S M L

**Authorization**

I hereby authorize the staff of the Tiger Basketball Camp to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the camp, all staff members and

ACCHS from any and all liability for any medical or other charges in connection with my child's attendance. I understand that violation of camp rules may result in dismissal from camp with tuition forfeited. We grant permission for him to participate in the camp and acknowledge the fact that he is physically able to participate in camp activities.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**REGISTRATION DAY OF CAMP**

For more information call Coach Wetig @ 913-833-2495 or 913-370-3500