

Shirt for each camper



\$40 per student;
\$20 per additional
family member

Camp Activities:

- Dunk Contest
- 3 on 3 Games
- Competitive skill contests
- Skill Development
- Dribble Tag
- Knockout
- Improve Individual Skills
- Team Competitions
- Provide Powerade

**Sponsored
by**

Location:
Labette County
High School
in
Harrison
Gymnasium

QUESTIONS ABOUT CAMP ?

Contact: Coach Smith
620-784-5329
LCHS 784-5329
bsmith@usd506.org
or
Coach Snider
ksnider@usd506.org

2019

**Labette County
GRIZZLY**

26th Annual

**BASKETBALL
CAMP**



Tuesday – Friday

May 28-May 31

Labette County Basketball

Come enjoy a week of instruction stressing the fundamentals of shooting, passing, dribbling, defense, and the overall TEAM game of basketball. You will learn drills which develop fundamental skills to take home and practice throughout the year.

Labette County Basketball Camp Staff

Brad Smith, LC Head Boys' Coach

Kristi Snider, LC Head Girls' Coach

Clint Witty, LC Asst' Boys' Coach

Brian Tucker, LC Asst' Boys' Coach

Heather Wilson, LC Asst' Girls' Coach

Brianna Volmer, LC Asst' Girls' Coach

Bradley Argabright, LC Asst' Boys' Coach

Greg Lambkins, LC Asst' Girls

Featuring other 506
Coaches and former
LCHS standout

Sessions

(Incoming Grade)

Grades 1 – 3 9:00 AM – 10:30 AM

Grades 4 – 6 10:30 AM – 12 PM

Grades 7 – 8 12:00 PM – 1:30 PM

High School

Girls 9th- 12th 7 AM – 8:30 AM

Boys 9th – 12th 7 PM – 9:30 PM

You may turn in your completed application form to Coach Smith or Coach Snider at LCHS. You may mail the forms to Labette County Basketball Camp, Attn: Brad Smith, PO 583, Altamont, KS 67330. You may bring money and completed form 20 min before your session on May 30.

COST IS \$40

\$20 for additional family members

APPLICATION FORM

STUDENT NAME: Please Print

AGE: ____ Grade in fall: ____ Boy or Girl

PARENT/GUARDIAN NAME: _____ MAIL
ING ADDRESS: (St., City, Zip)

NE: _____ PHO

SCHOOL: _____

T- SHIRT SIZE: (circle one)

Youth: Small Medium Large

**Adult: Small Medium Large
XL**

Make \$40 Check to: Basketball Camp Fund

Release and Indemnity:

I hereby request that you accept the application for the enrollment of:

In the Labette County Basketball Camp and in consideration of your acceptance of this application, I hereby release the basketball camp, employees and agents from all claims due to injury which may be sustained while attending basketball camp and employees and agents from any claims that might occur hereafter as a result of injuries.

Date: _____ Parent Signature:

Health Conditions;

