

2017 Fresno State Youth Basketball Camp

CAMP SESSIONS: MONDAY - THURSDAY

Session 1: June 12-15

Session 2: June 26-29

Session 3: July 31-Aug 3

Time: 9:00 am - 4:00 pm (Drop off as early as 8:30 am)

Thursday Will End at 1:00 pm!

Ages: Boys & Girls 6-17 Years Old (Session 3: 6 Year Olds - Entering 6th Grade)

Per NCAA Regulations

CAMP REGISTRATION FEE: \$170 (If Received in Full 1 Week Prior To Start of Camp)

WALK-UP REGISTRATION FEE: \$190

*\$25.00 discount per camper (\$145.00) when application is received as a group that numbers 4 or more

Open to any and all entrants (limited only by number, age, grade level and/or gender)

Concessions:
Water
Gatorade
Chips
Candy Bars

Camp Includes:

- *T-shirt for each camper
- *Autograph session with coaches and players
- *Athletic trainer on site
- *Camp held on Fresno State Campus

Lunch Options
Bring a sack lunch or
Pizza will be sold

Campers will be instructed by the
Fresno State Coaching Staff and Players

Featuring Players From Both The 2016 NCAA Tournament Team and the 2017 NIT Team

- *Shooting
- *Ball Handling
- *Passing
- *Defensive Instruction
- *Competitions and Games
- *League games within their age group

MORE INFORMATION - Email: Brandon Wiesemann at bwiesemann@csufresno.edu
or call 559-278-1789 or visit our Website at GoBulldogs.com

Please fill out section below and send with Payment to following address:

5305 N Campus Dr. M/S NG27 Fresno, Ca 93740 Attn. BRANDON WIESEMANN
Check payable to Fresno State Men's Basketball Camp

FRESNO STATE MEN'S BASKETBALL

Campers Name: _____ SESSIONS (Circle): 1 2 3
Address: _____
City, St, Zip: _____
Email: _____ Age: _____ Grade: _____
Parent(s) Name: _____
Contact Number: _____
T-Shirt Size: (circle one) Adult S M L XL XXL

Liability/insurance Statement

I hereby authorize the staff of Fresno State Basketball Camp to act for me according to their best judgment in any emergency requiring medical attention and I waive and release the camp from any/all liability for injuries incurred while at camp.

Parent/Legal Guardian Sign

Please list all previous health conditions the camp staff needs to be aware of; (i.e. asthma, concussions, allergies, injuries, etc.)

Insurance Company _____

Policy# _____