



**BISHOP WATTERSON
SUMMER BOYS BASKETBALL CAMPS
2018**
*2013 Division II State Champions
2014 State Runner-Up
2018 Central Catholic League Co-Champions*

Session 1: June 11 - June 14
Bishop Watterson High School
Students entering grades 7 and 8
1:00 p.m. – 4:00 p.m.
Check-in begins at 12:30 p.m.
Fee: \$110.00

Session 2: June 18 - June 21
Bishop Watterson High School
Students entering grades 4, 5, and 6
9:00 a.m. – 12:00 noon
Check-in begins at 8:30 a.m.
Fee: \$110.00

Session 3: June 25-28
Bishop Watterson High School
Students entering grades 7 and 8
9:00 a.m. - 12:00 noon
Check-in begins at 8:30 a.m.
Fee: \$110.00

Session 4: June 25-28
Bishop Watterson High School
Students entering grades 4, 5, and 6
1:00 p.m. – 4:00 p.m.
Check-in begins at 12:30 p.m.
Fee: \$110.00

Session 5: July 9– July 12
Bishop Watterson High School
Students entering grades 5, 6, and 7
9:00 a.m. – 12:00 noon
Check-in begins at 8:30 a.m.
Fee: \$110.00

***** Each camper will receive a camp T-shirt and a basketball. *****

The Watterson Basketball Camp will be conducted by Coach Vince Lombardo and the Watterson Coaching Staff, assisted by current and former Watterson varsity players. Our gymnasium features two full courts for team play and six baskets for individual instruction and drills. Camp instruction will focus on fundamental basketball skills, competition, and fun!

Locker room facilities will be available.
Campers need to bring basketball gear: shoes, shorts, T-shirt, white athletic socks.
Water is always available, and campers are offered a daily pop break.

TO REGISTER: COMPLETE FORM ON REVERSE!



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NAME _____ PHONE _____

ADDRESS _____

GRADE IN SCHOOL AS OF 9 / 18 ____ SCHOOL _____

SESSION OF CAMP ATTENDING: please circle your choice (s)

SESSION 1 SESSION 2 SESSION 3 SESSION 4 SESSION 5

SHIRT SIZE: please circle your choice

Youth XL Adult S Adult M Adult L Adult XL

WAIVER: I give my son permission to participate in the Watterson Basketball Camp and release Watterson High School from any and all liability in case of injury. I authorize the Watterson Coaching Staff to act in my behalf in case of medical emergency.

(Parent's Signature)

EMERGENCY NOTIFICATION: In case of emergency, please notify

_____ at the following phone number: _____

PLEASE MAKE YOUR CHECK PAYABLE TO WATTERSON ATHLETICS.

MAIL COMPLETED FORM AND FEE TO:

Doug Etgen, Director of Athletics
Bishop Watterson High School
99 E. Cooke Rd.
Columbus, Ohio 43214