

<b>Feature</b>	<b>Cost</b>	<b>Time &amp; Place</b>
Quality instruction	\$75.00	Highland High
By Highland Coaches & players		Main Gym
Camp Reversible Camp T-shirt & basketball		Next years grades 3 <sup>rd</sup> , 4 <sup>th</sup> , 5 <sup>th</sup> , 6 <sup>th</sup> 7 <sup>th</sup> & 8 <sup>th</sup> Grades 9am to 12:00

**All grades are in the morning**



**Right**

**Attitude**

**Means**

**Success**

Opportunity to learn Offense and Defense skills that will help you become a better player  
\*Camper should wear shorts and basketball shoes

Any Questions please Contact:  
Chris Frost  
237-3589 School  
237-1291 Home

**Go to [gohighlandrams.com](http://gohighlandrams.com)**



**When:** June 6th thru 9<sup>th</sup>

**Where:** Highland Main Gym

**Time:** 9:00 AM to 12:00

All Grades are in the morning

**Cost:** \$75.00

\$85.00 at the door

Name \_\_\_\_\_

Grade Next year \_\_\_\_\_ School \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Parents Name \_\_\_\_\_

Emergency Phone \_\_\_\_\_

## Highland Youth

### Boys Basketball Camp

**June 6<sup>th</sup> - 9<sup>th</sup>**

**Grades**

**3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>,  
7<sup>th</sup> & 8<sup>th</sup>**

**(Next year)**

**9AM to 12:00**

**All grades are in the morning session  
Highland Youth Basketball Camp**

#### Consent Form

I hereby consent to the above name to participate in the Gate City Camp and fully understand that I will be responsible for any liability which maybe incurred due to injury during the camp. I also understand that the Gate City Camp will not provide any medical insurance so the cost of the camp can be held as low as possible. Therefore, I feel my insurance will cover any said liability.

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

Mail to:  
Chris Frost  
PO Box 2812  
Pocatello, Idaho 83206