

SCHOOL OF HOOPS™

Presents ...

T.O.P. Camp

Total Offensive Player

Offering professional instruction to players beginners to advanced, who have a sincere interest to develop and improve their **OFFENSIVE FUNDAMENTAL BASKETBALL SKILLS**

O.C.A. Day!

Improvement in skill, confidence, and consistency!

Who	Dates & Times	Cost
Coed – Grades 3-8	THURSDAY, APRIL 13, 2006 Camp offered ½ day 9:00 am-12 pm or 12:30 pm-3:30 pm OR full day 9:00 am-3:30 pm	\$25 ½ day \$40 full day
Coed-High School	3:30-5:30 pm	\$20

Instructional Topics

- The Ready Stance
- The 4 “ball” skills
- The Priority Principle
- Learning to play without the ball - 8 ways to get open
- The Art of Shooting ...the proper technique ...become more accurate and consistent ...to shoot off the pass, dribble, and screens equally well ...develop a quicker release

The following O.C.A. families recommend this as a quality learning experience:

- **Henkenius**
- **Patterson**
- **Warnke**
- **Colegrove**
- **Zimmerle**

Bring a basketball and a lunch

Instructor

Jim Seward – a successful collegiate coach for over 30 years. Accomplishments include; nearly **600** collegiate victories, **4** NCAA National Players of the Year, **21** All-Americans, **32** Professional Players, and **30,000** basketball participants.

LOCATION

Fletch’s Court
2015 N. 84th St. (& Blondo)
Omaha, NE

“Where the Champions of Tomorrow are Playing Today”

Camper’s Name _____ Age _____ Email Address _____
 Address _____ City _____ State ____ Zip _____
 Home Phone _____ Parent’s Work Phone _____ Parent’s Work Phone _____

Waiver of All Claims

In consideration of being allowed to participate, I the undersigned parent/guardian of above listed participant waive all claims for injury, death, damage or loss of any kind and hereby release School of Hoops, LLC, and all associated gymnasiums, their employees, members and representatives from any claims. In addition, I hereby consent for any medical treatment that may be deemed advisable in the event of injury, accident and/or illness.

Signature of Parents(s) or Guardian(s): _____
 Name Relationship Date

Checks should be made payable to: **School of Hoops - Bring the registration and payment with you to camp.**

Time (please check one) _____ ½ day 9:00 am – 12:00 pm _____ ½ day 12:30 pm – 3:30 pm
 _____ Full day 9:00 am – 3:30 pm _____ High School 3:30-5:30 pm