



GIRLS BASKETBALL CAMP



Day Camp
June 18-22, 2012

Overnight Camp
SUNDAY THROUGH THURSDAY
July 29–August 2, 2012



Athletic Department
One Winooski Park, Box 258
Colchester, Vermont 05439

Non-Profit
Organization
U.S. POSTAGE
PAID
Burlington, VT
05401
Permit No. 154



In case of emergency contact: _____

Phone: _____

I understand our family will provide insurance coverage if our son/daughter is injured while participating in a Saint Michael's College Sports Camp.
Health Insurance: _____

Company: _____

Policy #: _____

Family Doctor: _____

I hereby state that my son/daughter is in good health and may participate in the Saint Michael's College All Sports Camp. I also give permission to the attending health professional, in case of emergency, to allow my son/daughter to be treated in the hospital emergency room, if necessary.

Printed name of Parent/Guardian _____

Signature of Parent/Guardian _____

Please list any special health problems or special circumstances: _____

GENERAL INFORMATION

CAMP DIRECTOR

Jen Niebling has just completed her ninth season as head coach of the Saint Michael's Collegewomen's basketball team, after serving as the top assistant at the University of Vermont for six seasons. She has directed the Saint Michael's day and overnight camps since 2003, and prior to that served as camp co-director at UVM for six years. Founder of Homegrown Hoops camp in Randolph Center, Vermont in the early 1990's, and the Trinity College camp in 1994-1996, Jen has been running girls basketball camps for over 15 years. With an emphasis on teaching, a variety of activities and lots of fun, campers have been frequent returners to her camps for many years.

COACHING STAFF

Our staff includes Saint Michael's College players and local high school and middle school coaches. Local college players will also serve as instructors.

EQUIPMENT

All campers will provide their own shorts, shirts, swimsuit, towel, combination lock, water bottle, and sneakers. All campers must have two pairs of shoes—one pair to be worn for inside activities, and the other to be worn outside. Outdoor footwear and/or black-soled sneakers will not be permitted on indoor courts.

FORMS

- Complete the attached registration form. Incomplete forms will be returned.
- Complete the Statement of Health form on reverse side.

MEDICAL/INSURANCE

An athletic trainer is on duty while camp is in session. Coverage by family or other health and accident insurance is required.

HOUSING INFORMATION

Overnight resident campers will be housed in a residential hall, double occupancy. We will attempt to honor roommates requests, and others will be assigned appropriately. Note: no linens will be provided.

MEALS

- Day Camp: Lunch will be provided in the campus dining facility and is included with the camp fee.
- Overnight Camp: First meal is dinner on Sunday night. Last meal is breakfast on Thursday.

CAMPS

- Day Camp: Offered for girls ages 7-17 years old. Monday through Friday, 9:00 a.m. to 3:30 p.m.
- Overnight Camp: Offered for girls ages 10-18 years old. Sunday, 4:00 p.m. through Thursday, 12:00 p.m.
- Overnight/commuter drop off (8:30 a.m. Monday through Thursday) and pick-up (8:00 p.m. Sunday through Wednesday) at the Tarrant Recreation Facility.
- Opportunity to use swimming pool.

CAMP INFORMATION

OBJECTIVE

Day Camp: To provide the athlete with knowledge and practical experience of basketball fundamentals. Campers will be instructed using group methods and team orientation. Games will be played each day to reinforce drills, lectures and demonstrations. Campers are assigned to a level based on age, size and experience.

Overnight Camp: A three-session per day overnight camp that will provide the serious athlete with fundamental skill development, with an additional emphasis on position play and team play. Campers will receive a realistic college experience—living and eating in on-campus facilities, interacting with other campers from the northeast region and nightly social activities. In addition to on-court instruction, nightly exposure to our camp staff will also allow campers to learn about college life and playing sports at a higher level. This is an excellent opportunity for campers to increase their skill level and learn team concepts while adapting to a college life-style. Campers will be assigned to a level based on age, size and experience.

FEES

- Day Camp: \$240.00 per week (5 full days and includes lunch)
- Overnight Camp: \$410.00 Resident Camper (includes all meals and housing)
\$325.00 Commuter Camper (includes lunch and dinner)
- Make checks payable to Saint Michael's College
- Fee includes meals, camp t-shirt and awards

DEPOSIT/CANCELLATION/ REFUNDS

A \$100 deposit per camp is required and should accompany your application. \$25 of the total deposit is non-refundable. The balance is refundable up to one month prior to the start of camp. No refunds will be given to campers who voluntarily leave camp or who are sent home for disciplinary reasons.

YOUR CANCELED CHECK CONFIRMS YOUR ENROLLMENT IN THE CAMP THAT YOU CHOSE.

Please note: incomplete applications will be returned and processing delayed.

Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.

REGISTRATION

- Day Camp: Tarrant Recreation Center at 8:30 a.m., first day of camp.
- Overnight Camp: Tarrant Recreation Center at 4:00 p.m., first day of camp.

DATES & TIMES

- Day Camp: Monday, June 18, 9:00 a.m. to Friday, June 22, 2012, 3:30 p.m.
- Overnight Camp: Sunday, July 29, 4:00 p.m. through August 2, 2012, 12:00 p.m.

FOR FURTHER INFORMATION, PLEASE CONTACT:

Jennifer Niebling, Camp Director
Athletic Department, Saint Michael's College
One Winooski Park, Box 258, Colchester, Vermont 05439
802.654.2505 • jniebling@smcvt.edu
www.smcvt.edu/athleticcamps



SAINT MICHAEL'S COLLEGE GIRLS BASKETBALL CAMP APPLICATION

Name: _____ Date of Birth: _____
Address: _____ City: _____ State: _____ Zip: _____
Home phone: _____ T-Shirt Size (circle one): _____ Child: L _____ Adult: S M L _____
Grade entering in fall: _____ School: _____ Age (at time of camp): _____
Name of parent/guardian: _____ Parent's day/work phone: _____
E-mail for confirmation: _____

A deposit of \$100 is required for EACH WEEK OF CAMP your child will be attending. The balance of camp fees paid upon registration. Please complete statement of health form on other side. \$25/camp is non-refundable.

Please indicate the session desired for camp:
____ Day camp (\$240) / June 18-22, 2012 (Application due June 7, 2012)
____ Overnight camp (\$410) _____ Commuter (\$325) / July 29–August 2, 2012 (Application due July 14, 2012) Roommate request (optional) _____

Signature of parent/guardian: _____
Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.

Please make checks payable to Saint Michael's College and return to:
Saint Michael's College Summer Camps, Athletic Department, One Winooski Park, Box 258, Colchester, VT 05439

Office Only: Date Rec'd: _____ Amount Pd: _____ Check #: _____ Amount Due: _____ Initials: _____