Girls grade 3 through 10 in the fall of 2012 are eligible to attend

**TUITION RATES:**

**RESIDENT CAMPER:** $360
(Plus $50 damage/key deposit; refund at checkout)

**DAY CAMPER:** $270
Independent Health Members: you can use your "FLEX FIT" allowance toward camp tuition.

PLEASE NOTE: There is a $75 non-refundable deposit for EACH camper. There will be a $20 service charge for any returned checks.

**Each Camper’s Tuition Includes**
Reversible Jersey, Camp Water Bottle, Skills Evaluation and Memorable Experiences

**Discounts**
$20 discount if you register before June 1, 2012
$10 discount per camper when six or more campers submit applications together

**For additional information please contact:**
Rob Peterson
Head Women’s Basketball Coach/Camp Director
(716) 926-8775
Fax (716) 649-6429

Email: rpeterson@hilbert.edu
www.hilbert.edu/athletics/camps-clinics

---

**Sunday Check-In Schedule**
Registration/Open Gym………..2:30pm - 4:00pm
Camp Rules/Attendance …….4:00pm - 5:00pm
Dinner ......................................................5:00pm
Evaluation Games/Team Assignments …6:30pm
Dismissal/Open Gym .................................8:45pm

Championship Thursday General Schedule
B quarterfinals ..........................................9:15am
C & A semifinals .....................................10:05am
B semifinals ............................................11:05am
Picnic .....................................................11:15am
A Championship ......................................12:00pm
B Championship ........................................1:00pm
C Championship ........................................2:00pm
Camp Dismissal ........................................3:00pm

**“Quick Day Camp Facts”**
Day camp runs from 9am until 9pm, more instruction than any other camp in WNY.
Day camp includes a nutritious lunch and dinner.
Your daughter will play in 3 competitive basketball games each day and will play at least half of each game. We limit each team to 10 players.
No hidden costs - all meals and services are included in camp tuition.
Camp Application

I HEREBY DESIRE that my child, who is under the age of 18, participate in the basketball camp offered by Hilbert College and by the execution of this release, I hereby release Hilbert College and all of the personnel associated with the camp from any and all liability that may arise from my child's participation in the camp.

Name ___________________________________________

Height __________ Weight __________

DOB __________

Jersey Size: Youth: M L Adult: S M L XL XXL

Email address ____________________________________

Number of years child has attended camp ___________

Resident campers only: Depending on the camp enrollment, your child may be placed in a dorm room with 2 other campers. In this situation, one mattress will be placed on the floor. The beds will be assigned in each room based on first come, first assigned in air conditioned Trinity Hall.

ROOMMATE PREFERENCE _____________________________________ / ____________________________________

ALL CAMPERS...

When your application and deposit have been processed, a confirmation letter with detailed instructions on what basic items you should bring to camp will be mailed.

An emergency contact/medical information form will also be mailed. Please mail your medical information form before check-in. Expect to complete one additional signature page if your child requires non-prescribed or prescribed medicine during the week of camp.

IMMUNIZATION RECORDS MUST BE UP TO DATE.

We require a copy of your child’s immunization dates. I give the camp permission to use any camp related photos of my child for camp publicity. I understand that the week's tuition fee includes the use of all facilities and accident insurance. I know of no medical or physical problems which may affect my child's ability to safely participate in this camp. I am responsible for any medical or any other charges in connection with my child's attendance at the Hilbert College Hawks Basketball Camp.

Signature of Parent or Guardian ______________________________

TYPICAL DAY AT CAMP

7:30AM WAKE UP WHISTLE IN DORM
7:30-8:30AM BREAKFAST SERVED
8AM-9AM OPEN GYM
9:00AM ATTENDANCE AND STRETCHING IN GYM
9:20AM STATIONS
10:50AM ATTENDANCE/GAMES/VIDEO
11:45AM GAMES/LUNCH
12:30PM LUNCH/REST PERIOD IN DORM/OPEN GYM
1:30PM GAMES/REST PERIOD IN DORM
2:15PM COMPETITIONS
3:00PM GAMES/VIDEO INSTRUCTION
4:00PM LECTURE, ALL CAMPERS TO GYM
5:00PM DINNER
6:00PM TEAM PRACTICE
7:00PM GAMES/VIDEO
7:45PM GAMES/VIDEO
8:45-9PM CAMPER OF THE DAY PROGRAM
9-9:30PM OPEN GYM
9:30PM ALL CAMPERS TO RESIDENCE HALL
10:30PM IN OWN ROOM/LIGHTS OUT!

Parents are welcome at any time during the week to watch and cheer! Daily schedules will be posted outside of the gym.

CAMP LOCATION:
Hilbert College, 5200 South Park Ave.
Hamburg, NY 14075

IMPORTANT MEDICAL INFORMATION

Please mail child’s immunization record OR Fax to: (716) 649-6429

If your child requires non-prescription or prescription medication during the week of camp, please be prepared to follow these simple rules:

1. Medication should be given to our Athletic Trainer during registration by parent/guardian.

2. All medication is to be in its original container with camper’s name, name of medication, the dosage and the frequency of administration clearly marked.

3. A note from the doctor must accompany the medication, stating the name of camper, name of medication, the time it is to be given and the reason camper is taking medication.

4. At check-in on Sunday, an authorization form will be completed by the parent/guardian requesting the medicine be administered.

Resident and Day Camper Info:

Camper’s Name ____________________________________________

Height __________ Weight __________

DOB __________

Email address __________________________________________

Type of camper: resident/day

Email address __________________________________________

Number of years child has attended camp ___________

Jersey Size: Youth: M L Adult: S M L XL XXL

Resident campers only: Depending on the camp enrollment, your child may be placed in a dorm room with 2 other campers. In this situation, one mattress will be placed on the floor. The beds will be assigned in each room based on first come, first assigned in air conditioned Trinity Hall.

ROOMMATE PREFERENCE _____________________________________ / ____________________________________

ALL CAMPERS...

When your application and deposit have been processed, a confirmation letter with detailed instructions on what basic items you should bring to camp will be mailed.

An emergency contact/medical information form will also be mailed. Please mail your medical information form before check-in. Expect to complete one additional signature page if your child requires non-prescribed or prescribed medicine during the week of camp.

IMMUNIZATION RECORDS MUST BE UP TO DATE.

We require a copy of your child’s immunization dates. I give the camp permission to use any camp related photos of my child for camp publicity. I understand that the week's tuition fee includes the use of all facilities and accident insurance. I know of no medical or physical problems which may affect my child's ability to safely participate in this camp. I am responsible for any medical or any other charges in connection with my child's attendance at the Hilbert College Hawks Basketball Camp.

Signature of Parent or Guardian ______________________________