



# 2018 Phoenix Basketball Camp

July 9-11, 2018

Sonoraville Recreation Department Gym

8:30 am-12:00 pm

Boys and Girls

1st Grade - Upcoming 9th Graders

**\$40 per camper (includes t-shirt)**

(Discount for siblings - \$35 per camper)

You may pre-register through the mail  
or register on the first day of camp

Checks should be made payable to  
*Sonoraville High School*

**The camp will emphasize:**

- **Ball Handling**
- **Passing**
- **Shooting Technique**
- **Defensive Skills**
- **Team Fundamentals**
- **Good Sportsmanship**

**All campers will benefit from  
individual and group instruction.**

Please mail  
completed forms  
& checks to:

Sonoraville High School  
Attn: Brent Mashburn  
7340 Fairmount Hwy SE  
Calhoun, GA 30701

Camper Name: \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_ Grade for Upcoming School Year: \_\_\_\_\_

Circle: Boy / Girl      Shirt Size: AXL AL AM AS YL YM YS YXS

Emergency Contact: \_\_\_\_\_ Phone #: \_\_\_\_\_

I, \_\_\_\_\_, do hereby affirm that the applicant is in good health and suffers from no illness or condition that prevents vigorous activity. I also agree to be responsible for any medical bills due to injury or illness occurring while my child attends the camp. I consent to allow any camp supervisor to procure any medical treatment deemed necessary. **The Phoenix Basketball Camp provides no medical insurance.** As a condition of admittance of my child as a camper, I do hereby release Phoenix Basketball Camp and all camp employees from liability for injury and illness.

Signature \_\_\_\_\_ Date \_\_\_\_\_

For more information contact:

Coach Brent Mashburn  
Phone: 678-986-6458  
Email: bmashburn@gcbe.org

Coach Stephanie Caudell  
Phone: 678-986-7064  
Email: scaudell@gcbe.org