

Camp Check-In

Monday, June 22, 2009, between 8:00 a.m. - 8:30 a.m. at the Alma Grace McDonough Center

Camp Schedule

Day Camp for Ages 6-9

Monday - Thursday: 9:00 a.m. - 12:00 p.m.

Day Camp for Ages 10-17

Monday - Wednesday: 9:00 a.m. - 3:00 p.m.

Thursday: 9:00 a.m. - 12:00 p.m.

Elite Camp for Ages 10-17

Monday - Wednesday: 3:30 p.m. - 5:00 p.m.

Tuition

\$85.00 day camp for ages 6-9

\$175.00 day camp only for ages 10-17 (includes lunch)

\$225.00 day and elite camp for ages 10-17 (includes lunch)

If paid before April 30, 2009, tuition is \$75.00 for day camp ages 6-9; \$165.00 for day camp ages 10-17; and \$210.00 for day and elite camp ages 10-17.

If a camper is unable to attend, the tuition minus a \$50.00 service charge for ages 6-9 and a \$100.00 service charge for ages 10-17 will be refundable as long as the camp is notified in writing on or before June 8, 2009.

Day Camp Stations and Lectures

Ball handling	Offensive movement and spacing
Passing	Defensive position and pressure
Shooting	Fast-break drills
Post-play	Speed and strength
Position break-downs (points, wings, bigs)	

Meals

Lunch is included in the camp price for ages 10-17 and will consist of a 45 minute break. During the day, concessions will be available at the camper's cost in the lobby of the Alma Grace McDonough Center. Concessions will be serving hot dogs, soft pretzels, Gatorade, soda and other snacks.

What to Bring

Campers should wear sneakers, a t-shirt and basketball shorts. Campers are **not to bring** basketballs. Jewelry and earrings are not permitted.

Insurance and Medical Coverage

The Wheeling Jesuit University basketball camp does **not provide** health or accident insurance. The camper's guardian's medical insurance plan must be used for payment for all medical services.

The Wheeling Jesuit University Athletic Trainer and/or one of his associates will be on site to attend to any medical issues for the duration of the camp. Wheeling Hospital physicians will be available for any medical illness or sports related injury.

Address Correction Required

Danny Sancomb, Men's Basketball
Alma Grace McDonough Center
Wheeling Jesuit University
316 Washington Avenue
Wheeling, WV 26003



Danny Sancomb Basketball Skills Camp

Boys and Girls Camp
Ages 6-17

June 22-25, 2009

Alma Grace McDonough Center
Wheeling Jesuit University
316 Washington Avenue
Wheeling, WV 26003



WHEELING JESUIT UNIVERSITY



WHEELING JESUIT UNIVERSITY



March 15, 2009

Dear Parents:

I have developed a boys and girls camp to teach high level basketball skills. It is essential that young players learn to practice with a purpose. Fundamental skills such as balance, footwork, running, ball handling, shooting, defense and rebounding are essential to all players regardless of age or position. This camp will emphasize individual instruction and team competition. All drills will take place at game speed and progress from 1-on-1 to 2-on-2 to 3-on-3 game situations. I have assembled an outstanding group of coaches and players who share our philosophy and have a passion for teaching the fine details of this game.

The event will be held in an air conditioned facility. Each camper will receive a Wheeling Jesuit University basketball t-shirt. The first 50 campers to register will receive a free Wheeling Jesuit University basketball.

I appreciate your support of the program and look forward to training your son and/or daughter.

Sincerely,

Danny Sancomb
Head Basketball Coach
Wheeling Jesuit University

FOR MORE INFORMATION, CONTACT:

Danny Sancomb at 304-243-2366 or dsancomb@wju.edu
Chad Dickman at 304-243-2083 or cdickman@wju.edu
Doc Merrick at 304-243-3490 or gmerrick@urologicresearchinstitute.org

Registration

Contact Danny Sancomb at 304-243-2366 or email dsancomb@wju.edu with any questions.

One application per attendee

Please Print Clearly

Camper's Name: _____

Address: _____

City: _____

State: _____

Zip Code: _____

Home Phone: _____

Parent's Work Phone: _____

Parent's Cell Phone: _____

Grade as of September 2009: _____

Age as of July 1, 2009: _____

School: _____

School Coach: _____

Shirt Size (please circle):
Youth - S M L XL 2XL
Adult - S M L XL 2XL

Health/Accident Insurance Coverage

Name of Company: _____

Agreement Number: _____

Group Number: _____

Make checks payable to "Danny Sancomb Wheeling Jesuit University Men's Basketball." Please mail completed application and payment to:

Danny Sancomb
Wheeling Jesuit University
316 Washington Avenue
Wheeling, WV 26003
Ph: 304-243-2366

All parents of participants will be required to complete and sign a Wavier of Responsibility. **Full payment must be received by Friday, June 12, 2009, in order to secure your spot. To receive the discounted rate, payment must be received before April 30, 2009.**

First 50 campers to register will receive a free Wheeling Jesuit University basketball.

Waiver of Responsibility

When an individual participates in various programs at Wheeling Jesuit University through the Athletics Department (including camps/clinics conducted by Wheeling Jesuit University Coaches), he or she understands that there are certain risks in connection with such activity and must agree to the following:

I agree to release Wheeling Jesuit University (and all its officers, employees and agents) and the Basketball Camp from responsibility in all manner of actions and causes of action - i.e., suits, debts, accounts, judgments - including all claims arising out of incidents involving personal injury of any kind by reason of participation in the Basketball Camp.

I assume any and all risks arising from my participation in the Basketball Camp, including, without limitation, the risks of bodily injury or property damage, the unavailability of emergency medical care, or the negligent acts of another person.

I will indemnify and hold harmless Wheeling Jesuit University (and its officers, employees and agents) and the Basketball Camp for any and all claims, causes of action, damages, judgments, costs or expenses that arise out of or relate to my own negligent or intentional act or omission.

The undersigned expressly acknowledges that he or she has read and understands this Agreement and Release and signs it freely and voluntarily.

This waiver is intended to be legally binding.

Name of Camp Attendee (print) _____

Name of Parent or Legal Guardian (print) _____

Signature of Parent or Legal Guardian _____

Date _____