BEARS BASKETBALL CAMP 2023 PRESENTED BY JEREMIAH TEUSCHER BASKETBALL



BEARS BASKETBALL CAMP 2023 (Jeremiah Teuscher Basketball LLC)		
SESSIONS:		
June 5-8 from 9:00 am - 12:00		
June 19-22 from 9:00 am – 12:00		
FOR:		
5 th – 9 th Grade Boys		
(Grade in Fall of 2023)		
LOCATION:		
Bartram Trail High School		
COST:		
\$125 per week		
PAYMENT INFORMATION:		
Venmo @JeremiahTeuscherBasketball		
Check to Jeremiah Teuscher Basketball LLC		



For the past 16 years I have had the privilege to coach basketball at Bartram Trail. It is a special place with a strong tradition in athletics. I am excited that your son will have the opportunity to come to camp this summer. Camp will consist of improving fundamentals, daily challenges, small-sided games, shooting competitions, and 3 on 3 / 4 on 4 / 5 on 5. We will focus on helping campers improve basketball skills as well as teaching important lessons through basketball.

See you at Camp!

Coach Jeremiah Teuscher

BEARS BASKETBALL CAMP 2023- CAMPER REGISTRATION FORM

Camper Name:		
Grade (Fall of 2023): Shirt Size:		
Parent/Guardian Name:		
Parent/Guardian Email:		
Parent/Guardian Phone #:		
Health Insurance Company:	_ Policy Group #:	
Emergency Contact:	Relationship:	
Emergency Contact Phone #:	Alternate Phone:	

List any medications, allergies, health problems of which the staff should be aware. Include any prescription or nonprescription medication the student will be administered or allowed to take during the hours of camp:

Camp Sessions (Circle Session/Sessions camper will attend)

- Session 1 June 5-8-from 9:00 am 12:00
- Session 2 June 19-22 from 9:00 am 12:00

Payment Information

- \$125 per week
- Checks made out to Jeremiah Teuscher Basketball LLC
- Venmo @JeremiahTeuscherBasketball
- Registration Information can be emailed, mailed, or brought on first day of camp.

Coach Contact Information

• Email: Jeremiah.teuscher@stjohns.k12.fl.us (Please email to reserve spot)

Mailing Address for Registration Form & Check

 Attention: Jeremiah Teuscher 7399 Longleaf Pine Parkway St. Johns, Florida 32259

I as a parent/guardian, hereby give permission for my child to participate in the Jeremiah Teuscher Basketball Camp. I acknowledge the fact that he is physically able to participate in camp activities. I authorize the directors of the camp to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost (through family medical insurance or otherwise) due to sickness or injury to my son. I hereby waive any claim I might have against the Jeremiah Teuscher Basketball Camp and the institution providing the facilities.

Parent/Guardian Signature		Date:
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Parent/Guardian Printed Name: ______Phone #: _____

PLEASE EMAIL FLYER BACK TO <u>Jeremiah.teuscher@stjohns.k12.fl.us</u> OR bring on the first day of camp.