

# Summer Girls Basketball Camps **PALO ALTO**



## **PALO ALTO** 2009 **HOOPS**

### SKILLS PROGRAM FOR GIRLS AT ALL GRADE LEVELS.



The Palo Alto Hoops summer camps are designed for highly motivated players who are committed to improving their

offensive and defensive skills, court awareness and understanding of the game. The camps are restricted to a limited number of players to allow for close personal instruction, to ensure maximum individual improvement.

Lunch is provided for *all-day* camps.

- Video shot analysis
- Advanced ball handling
- Individual & team defense
- Triple threat fundamentals
- Court awareness
- Targeted instruction

All camps held at:  
**Palo Alto  
High School  
Gymnasium**

Space is limited, scholarships available  
Questions to: [isascott@hotmail.com](mailto:isascott@hotmail.com)  
Phone: 408.315.3962

Palo Alto Hoops is directed by Scott Peters, Head Basketball Coach at Palo Alto High School.

Middle-School: 6<sup>th</sup>-8<sup>th</sup> Grade

- June 15-19<sup>th</sup>
- July 13-17<sup>th</sup>
- July 27<sup>th</sup>-31<sup>st</sup>
- 9:00a.m.-3:00p.m.

**\$325**

Elementary-School: 2<sup>nd</sup>-5<sup>th</sup> Grade

- June 15-19<sup>th</sup>
- July 13-17<sup>th</sup>
- July 27<sup>th</sup>-31<sup>st</sup>
- 9:00a.m.-noon

**\$200**

High-School: 9<sup>th</sup>-12<sup>th</sup> Grade

- June 15<sup>th</sup>-18<sup>th</sup>
- 3:30p.m.-6:30p.m.

**\$125**

Register on-line at: <http://paloaltohoops.org/registration> or

Please detach and send along with payment

June 15-19 <sup>th</sup>	July 13-17 <sup>th</sup>	July 27-31 <sup>st</sup>	June 15-18 <sup>th</sup>
<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> Half-Day <input type="checkbox"/> Full-Day	<input type="checkbox"/> High School 3:30-6:30PM

**Make checks payable to :**  
**Palo Alto City Hoops**  
398 Irving Avenue  
San Jose, CA 95128

Participant Name: \_\_\_\_\_ Grade: \_\_\_\_ School: \_\_\_\_\_ T-shirt size (M): YL S M L XL

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

*50% refund available if cancelled 30 days in advance, No refunds once camps begin.*

I, the undersigned parent or guardian of \_\_\_\_\_, wish my child to participate in a Palo Alto Hoops program. As the legally responsible adult, I make the following statements voluntarily and with full intent that they be relied upon: I understand that basketball is a potentially risky activity in which my child might be injured. I therefore release any and all employees of Palo Alto City Hoops from liability of any kind of injury to my child, however serious, because of or in connection with the activity.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_