

SUMMER 2010



THE NATIONAL BASKETBALL ACADEMY
HOUSTON ROCKETS
 CAMPS • CLINICS • LEAGUES • TRAINING

Register early to guarantee a spot!!

Camps are for boys and girls ages 6-16 (except where noted). Participants will be separated by gender, age, and ability whenever possible.

\$245 per camper
 (unless noted different)



Players are not scheduled to appear*

Westbury Christian
 10420 Hillcroft
 Houston, TX 77096
July 5-9 9:00-3:00



Players are not scheduled to appear*

Camp Schedule

1. Thought of the day/Warm-up
2. Skill Development Stations: Ball Handling, Passing, Shooting, Defense, and Rebounding
3. Daily Contest: Hot Shot, Free Throws, X-out Lay-Ups, and Knock Out
4. Lunch (players need to bring their own)
5. Games: 3 on 3 and 5 on 5

Camp Highlights

1. 5 days of great instruction, games, contests and fun!
2. Rockets t-shirt, basketball and headband
3. Rockets 2010-2011 game ticket
4. Camp skills packet to take home
5. Money Ball at the end of each day

Introducing our: "Rockets Jersey Bag" which will be provided to each participant.



Typical Activities

Thought of the Day	Shooting	Free Throws
Warm Up	Defense	X-out, Lay Ups, and Knock Out
Skills Development Stations	Rebounding	Lunch (Bring your own)
Ball Handling	Daily Contest	Games 3-on-3 and 5-on-5
Passing	Hot Shot	

Sibling Discount of \$10 Off each camper

HOUSTON ROCKETS 2010 BASKETBALL CAMPS REGISTRATION FORM

www.thebasketballacademy.com to register online / Call 713.492.8469 for more information.

Sibling Discount of \$10 Off each camper

Houston Rockets
 Summer Basketball Camp
 Boys and Girls ages 6-14

Westbury Christian July 5-9, 2010
 Cost: \$245

9:00am-3:00pm

Westbury Christian
 10420 Hillcroft
 Houston, TX 77096

2010 Summer Camps (please check box)

CAMP CAN BE PAID FOR IN FULL – OR – A \$100 NON-REFUNDABLE DEPOSIT CAN BE MADE WITH REMAINING BALANCE TO BE PAID TWO WEEKS BEFORE CAMP BEGINS. (Spot is not guaranteed if remaining balance not paid 2 weeks prior.)

Please complete this registration form, including parent or guardian signature, and send to:
 The National Basketball Academy, 23400 Mercantile Rd. Suite 5, Beachwood, OH 44122
 Make all checks payable to: The National Basketball Academy



*Please note all credit cards will be subject to an additional service charge of 3% of the total dollar transaction.

Camper's Name _____

Parent or Guardian Name _____

Address _____

City/State/Zip _____

Home Phone _____ Parent's Work Phone _____

Parent's Cell Phone _____ Camper D.O.B. (MM/DD/YY) _____ Grade _____

E-mail _____ T-Shirt Size YM YL S M L XL XXL

Credit Card # _____ Exp. Date _____ 3-Digit Security# _____ (on back of card)

The SIGNER grants permission to The National Basketball Academy, the Houston Rockets, the NBA (and its designees and agents) to utilize the Signer's child's image, likeness, actions and statements in any live or recorded audio, video, or photographic display or other transmission, exhibition, publication or reproduction made of, or at, the Event in any medium or context without further authorization or compensation.

We, the undersigned, do hereby consent to our child's participation in the Houston Rockets camp. Our child is in good health and can participate in all activities. Therefore, in consideration for the services to be performed by the National Basketball Academy and the Houston Rockets, I/we do further release their agents and employees and any others associated with the camps from any and all claim or liability to us or our child for any damages or injuries which may be sustained by our child in connection with the Houston Rockets camps.

In the event that reasonable attempts to reach parents/guardians at phone numbers listed have been unsuccessful, I hereby give my consent for the administration of any treatment deemed necessary by: _____ (preferred physician and phone) or by another licensed physician or the transfer of child to nearest appropriate hospital or emergency facility. This authorization does not cover major surgery unless the medical opinions of two licensed physicians or dentists, concurring in the necessity for surgery, are obtained prior to performance of surgery.

Parent or Guardian Signature _____

Parent or Guardian Signature _____

Amt. charged to card \$ _____