



Pacific Lutheran University Women's Basketball Youth Clinics

Sunday September 28, 2008
12:30p.m. – 3:00 p.m.
& Sunday October 26, 2008
12:30 p.m. – 3:00 p.m.

Clinic Emphasis:

1. To acquire basic knowledge of the playing rules of basketball.
2. To improve individual basketball skills and performance.
3. To have an enjoyable basketball experience.

Ages: Grades 2-7

Cost: \$30 per child, \$40 day of clinic

Check In: 12:00 p.m.

Registration: All campers must complete an application; registration will be open through the day of the clinic. A check must accompany all applications (please make checks payable to PLU Women's Basketball). Please specify which clinic you will be attending on the application. Each clinic costs \$30 (\$40 day of registration). Clinics will have a slightly different format with the same objectives in each. Enrollment will be limited; to secure a position please send your registration as early as possible.

Parents: First Aid – A staff member certified in first aid will be on duty at all times.

Camp Staff: Led by Head Coach Kelly Warnke and Assistant Coach Jamie Redd and staffed by the 2008-09 PLU Women's Basketball team.

For More Information Contact: Kelly Warnke (253) 535-7353 or warnkekm@plu.edu

This will be a great opportunity to meet the 2008-09 Lutes before the season begins. Youth will be instructed in small groups led by current PLU women's basketball team members. Each participant will receive an official PLU Women's Basketball t-shirt.

** Please remember to bring the waiver/insurance information form with you to the clinic

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YOUTH CLINIC APPLICATION

Complete this application form and mail this portion with a check for the full amount of \$30.00 (\$40 day of registration) check payable to PLU Women's Basketball to: Women's Basketball, Pacific Lutheran University, Tacoma, WA 98447.

Name _____

School _____

Address _____

City _____ **ST** _____ **Zip** _____

Phone _____

Cell phone _____

E-mail _____

I will attend the clinic on _____ **Sept 28**
or _____ **Oct 26**

Parent or Guardian

PLEASE PRINT

Grade: 2 3 4 5 6 7

Sex: Girl / Boy

T-shirt Size:

YM YL S M L

***Upon receipt of this application you will be e-mailed or sent a waiver/insurance form that will need to be completed prior to the clinic. Please complete that waiver and bring it with you the day of the clinic.

Call Kelly Warnke (253) 535-7353 with any questions.