



Coach Pete Vasil's 2024 MVP Basketball Camp

**Location: Sacred Heart School
Lyndhurst, NJ**

**Dates: Session 1 -June 24-June 28th
Session 2 -July 8-12th**

Times: 9-1pm (ask about early drop-off)

Cost per camp week: \$135

sign-up for both sessions and receive a \$20 discount

Grades: entering 3rd grade - 9th

Camp features:

INDIVIDUAL TEACHING STATIONS

TWO COMPETITIVE GAMES DAILY

DAILY BALL HANDLING WORKOUT

FULL COURT SHOOTING WORKOUTS

SPEED AND AGILITY SKILLS LADDER

Coach V's Snapshot:

**Distinguished Collegiate & International Playing Career
Top NJ-NY High School Coach 08'**

REGISTRATION FORM

Return form with payment to:
Coach Pete Vasil
56 East Emerson St., Clifton, NJ 07013
Or Return to Mrs. Vasil's (5-8 Science Teacher) mailbox

Payment can be : check made out to Pete Vasil, cash, or venmo @Angela-Vasil (indicate MVP camp and child's name on checks or venmo (Questions call or text @ 862-668-1450)

Name: _____

Address: _____

City & State: _____

Phone: _____

Cell: _____

E-Mail: _____

Age: _____

Entering Grade: _____

Gender: Male or Female

(Choose the session your child is attending by putting a check under each week)

Session 1: _____

Session 2: _____

I hereby authorize the staff of Pete Vasil's MVP Basketball camp to act for me according to their best judgment in any emergency requiring medical attention for my child, if I cannot be contacted.

WAIVER:

In consideration of acceptance of my child, I hereby for myself, my child, their heirs, executors and administrators hold harmless, waive and release any claim we may have for damages against the above mentioned organizations, camp operators, their officials, officers, employers or representatives, or their successors and assigns for any and all injuries that may be suffered.

SIGNATURE OF PARENT/GUARDIAN

DATE

I attest that my child is in sound condition to participate in all activities. I understand by signing this waiver any or all refunds will come in the form of camp credit, regardless of location change.

