

NIKE Basketball Camps

246 North Main Street

Sayville, NY 11782



Official Sponsor



NIKE Basketball Camps

**INTERSTATE SPORTS
ACADEMY**
Sayville, NY

2009 SESSIONS

The NIKE Basketball Camps are a great place for any young player to improve his or her skills, work hard, make new friends and have fun.

Campers at every NIKE Camp will develop all of their basketball skills; shooting, passing, dribbling, rebounding and defense. A NIKE Basketball Camp immerses you in the sport, giving you the kind of focused, intensive training that is essential to improvement. Over the course of the camp week, your self confidence will grow along with your skills and overall appreciation of the game.



Camp staff will consist of college and high school coaches, as well as college basketball players

CAMP INFORMATION

Interstate Sports Academy
246 North Main Street
Sayville, NY 11782
(631) 244-0400
www.isasportsacademy.com



CAMP FORMAT



DIVISIONS

Elementary:
4th and 5th grades
Middle School:
6th, 7th & 8th grades
High School:
9th thru 12th grades

CAMP CURRICULUM:

Fundamentals are taught not talked about
Comprehensive individual skill development
Personal attention
Individual offense
Individual defense
Team defense
Team offense
Ball Handling and passing
Fast breaks
Rebounding
Post moves
Movement off the ball
Transition

SCHEDULE & FEES

Camp dates:

June 29-July 3

July 6-10

July 20-24 (Girls only)

August 24-28

Day (9:00am- 4:00pm): \$345

Camp price includes Nike basketball and Nike t-shirt.

***NIKE and the Swoosh Trademark are trademarks of NIKE, Inc. and its affiliates, and are used under license. NIKE is the title sponsor of the camps and has no control over the operation of the camps or the acts or omissions of US Sports Camps.*

IT'S EASY TO ENROLL...

- Phone (631) 244-0400
- Online isasportsacademy.com
- Mail 246 North Main Street
Sayville, NY 11782

We appreciate payment in full at time of registration, but if more convenient, you can register with a \$100 dollar per session deposit payable by check, cash or major credit card.

And receive confirmation by mail or email. If registering with a deposit only, final payments are due one week prior to the first day of camp.

After you have registered, if you have to cancel for any reason, you will receive a credit for 100% off all camp fess paid (deposit or full payment). The credit is good for 2009 and is transferable to another family member.

HEALTH INFORMATION

Please note if the camper should be restricted from any activity: _____

Will the camper be taking medication during the camp? Y N
If YES, please indicate name of drug and dosage. _____

Please identify any medical condition/allergies which would require special attention: _____

I hereby certify the named camper is physically able to participate in the Camp and that I know of no restrictions, physical impairments, or any other facts, which in any manner limit his/her participation in such a program..

Physician's Name _____

Telephone() _____

Insurance Information: Carrier Name: _____

Policy Number: _____

I, the parent of _____, give permission for my child to receive emergency medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the named person below, before taking this action. I hereby waive and release the Staff, Camp Management and Sponsors from any liability for any injury or illness incurred while at camp. I understand that there is a risk of injury to my child as a result of camp activities, and knowingly and voluntarily assume all risk of such injury. I will be financially responsible for any medical attention needed during camp or resulting from an injury received at camp.

Home Phone () _____

Work Phone () _____

(SIGN) _____ (DATE) _____

Person to contact in the event I cannot be reached: _____

Phone () _____

NIKE Basketball Camps ISA Sports Academy



Student's Name First Last

(Address) Street

City State Zip

Telephone Email

Date of Birth Grade in '09 Sex

Camp Dates:

- June 29-July 3
 July 6-10
 July 20-24
 August 24-28

Payment Information

Person Paying _____

Address (if different) _____

Method of Payment: Visa Mastercard Check
 Deposit

Full Payment

Card # _____

Exp. Date _____

By submitting this application to US Sports Camps, Inc, I affirm that I have read and agree to the US Sports cancellation policy and hereby accept the terms of enrollment described in this brochure. Furthermore, I agree to pay all camp fees and authorize US Sports Camps to charge my credit card (if applicable).

Signature _____

Make check payable and mail to:
Interstate Sports Academy
246 North Main Street - Sayville, NY 11782
(631) 244-0400

isasportsacademy.com