

## AWARDS

Each camper will receive a 2017 camp tee-shirt and will compete for daily prizes.



Awards will be presented in the following areas:

Free Throws  
Speed Shooting  
Hot Shots  
Team Champions  
One on One  
Defense  
Hustle  
MVP



The Awards Ceremony will be held

Friday, July 28th at Noon

Family and friends are invited!

## TUITION

Individual Camper	\$200
Each additional sibling	\$180

Make checks payable to:

**Chris Loeffler**

Mail checks to:

**Chris Loeffler**

**6 Blake Drive**

**Clark, NJ 07066**



For more information contact

**Chris Loeffler**

at

973-477-8046

or

[glhighlanderhoops@gmail.com](mailto:glhighlanderhoops@gmail.com)

## 2017 HIGHLANDER BASKETBALL CAMP

July 24-28  
9 a.m. to 2 p.m.  
Boys entering grades 3-9  
@  
Governor Livingston  
High School  
More Courts this year!!!



**CAMP DIRECTOR**

**CHRIS LOEFFLER**

**HEAD BASKETBALL  
COACH**

**GOVERNOR  
LIVINGSTON H.S.**

## THE DIRECTOR

Coach Loeffler enters his third season as the head coach for the Highlanders. Prior to taking over at G.L., Coach Loeffler spent 12 years coaching high school basketball as an assistant, including stops at Rahway, Dayton and Cranford high schools.

## THE STAFF

The 2017 HIGHLANDER BASKETBALL CAMP offers one of the finest and most knowledgeable staffs in the area. Coach Loeffler will be joined by his entire staff at Governor Livingston High School as well as a number of current and former players.

## CAMP AGENDA

The primary objective of the camp is to teach the fundamental skills necessary to improve as a basketball player in a fun-filled environment. Experience the in-depth teaching of a private lesson in a group setting.

### The daily schedule will include:

- \*Individual Workouts
- \*Proper stretching techniques
- \*Fundamental drill stations
- \*Game play
- \*Individual competition and drills
- \*Lectures
- \*Contests
- \*Special game situations

**SNACKS AND BEVERAGES WILL BE AVAILABLE THROUGHOUT THE WEEK FOR PURCHASE!**

**BRING LUNCH MONDAY THROUGH THURSDAY!!**

**CAMP WILL END ON FRIDAY AT 12PM WITH AN AWARDS CEREMONY!!!**

## CAMP APPLICATION

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Sept. '17 Grade \_\_\_\_\_

Sept. '17 School \_\_\_\_\_

Tee-shirt size (**adult sizes only**):

(Please circle one) S M L XL

Medical Release: I certify that my child:

\_\_\_\_\_ Camper's Name

has received a physical exam by a licensed doctor within the past six months and is free from all illnesses, injuries or defects that would inhibit any and all participation in the activities of the "Highlander Basketball Camp."

\_\_\_\_\_ Parent or Guardian signature

I authorize the staff of the 2016 "Highlander Basketball Camp" to act for me in accordance with their best judgment in any emergency requiring medical attention and I hereby waive and release the CAMP, its director, coaches and all workers from any and all liability injuries incurred while at the CAMP.

\_\_\_\_\_ Parent or guardian signature

Please list an emergency contact.

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_