

CONSENT FORM

To the best of my knowledge, I/my child and/is in good physical condition and I am not aware of any physical infirmity which would make me/my child at risk to participate in any way with the camper's activities. I am fully aware of risks and hazards connected with this camp and do NOT hold TMAC, Inc. liable.

I agree not to sue or bring any legal action against TMAC, Inc., their employees, owners and agents from any and all liability claims, liens, or causes of action resulting from any damage, loss or injury (including death) while participating in the TMAC BASKETBALL CAMP or any other activity which may be conducted at such camp regardless of the cause of such loss, injury or damage. I know the risks and dangers of participating in basketball camps. My child and I assume all risk of injury or loss to his/her person and his/her property that may be sustained by participating in a TMAC BASKETBALL CAMP.

I hereby acknowledge that I have carefully read this Liability Waiver/Release Form and fully understand its content. I understand that TMAC, Inc. does NOT provide medical insurance and I am responsible for all medical expenses resulting from my child's participation in a TMAC BASKETBALL CAMP. In the event I cannot be reached in a medical emergency, I hereby grant permission to the camp staff to act on my behalf in case of a medical emergency. I understand campers not abiding by camp rules may be dismissed from camp.

During the period of the camp, I hereby give permission to provide appropriate medical attention to me/my child in the event of an accident, illness, or injury. I will be responsible for all medical costs of medical coverage and treatment provided not covered by insurance.

I consent to all videotaping and photographing during the tournament. I agree that these images can be used at any time and in any manner consistent with the promotion of the sport without payment to me and without my approval.

I have carefully read this agreement and understand each provision. I also understand that this waiver is binding upon me and my family members, heirs, and representatives. I freely signed this agreement on ___/___/___ date.

NOTE: Campers need to wear court-type shoes (no sandals or street shoes) and clothing that is comfortable for strenuous physical activity.

Signature of Participant

Signature of Parent/Guardian

Date

GAME TIME!



Recreation Director:

Hugh Elton

Phone: 912.748.5776 (Ext. 701)

Camp Director:

***Gregory L. Williams**

Website: www.tmac1995.org

Phone: 706.495.5989

SPRING BREAK BASKETBALL CAMP



**Pooler Recreation
900 S. Rogers St., Pooler, GA 31322**

3 GREAT OPTIONS!!!

- **Session 1: March 26-28, 2018: \$85**
- **Session 2: March 28-30, 2018: \$85**
- **Week: March 26-30, 2018: \$100**

**8:00am - 3:00pm
Boys and Girls: Ages: 6-13**

CAMP DIRECTOR



Gregory L. Williams:

Started his first camp in Georgia (1998), training many young athletes about the mechanics and fundamentals of basketball. Since then, he has been Tracy McGrady's camp director for nearly 15 years. Mr. Williams has organized many basketball camps and trained hundreds of youth, ages 6-18, from Florida, Georgia, South Carolina, North Carolina, Oregon, Washington D.C., Texas, and Bocata, Colombia.

Mr. Williams utilizes the mechanics and fundamentals of basketball as the building blocks to develop character, self-esteem, and leadership on and off of the basketball court. Gregory L. Williams is CEO of TMAC, Inc. and Chief Operating Officer for the Tracy and CleRenda McGrady Foundation.

SCHEDULE

Check In/TEAM Time

Stretching/Conditioning

Defensive Skills, Speed & Agility

Dribbling/Foot Work

Passing/Free-Throws

Lay-ups/Jump Shots

Mechanics/Techniques/
Fundamentals:
(Passing, Eye-Hand Coordination, Catching, Shooting, Rebounding, Lay-Ups, Jump Shots, etc.)

Lunch ***BRING YOUR OWN** 12:00 – 1:00

Team Games

2 Ball, Knock Out/Gotcha

Parent Pick-up.....**3:00 pm**

**Basketball Dreams Academy Operates On A
First Come, First Serve Basis!**

WEEK RATE:

PRE-Registration: \$100 (Until FEB. 28)

Registration: \$125 (Starting March 1)

ALL WALK UPS: **\$150

Camp Giveaways:

Session 1 & 2: ***Headband *Wristband**

Week: ***Poster *Headband *Wristband**

REGISTRATION FORM

PRE-Registration: NOW – Feb. 26 2018

Session 1: 30 Campers (Max)

Session 2: 30 Campers (Max)

Week: 70 Campers (Max)

Register ONLINE at:

www.PoolerRec.com

Camper:

(First & Last)

Gender: (circle) Female Male

Age: _____ **D.O.B.:** _____

Physical Address: _____

Father/Mother/Guardian: (First & last)

Phone Numbers

Home: _____

Cell: _____

Emergency Contact: _____

Phone: _____

Medical Conditions: (ALL) _____

Medicines: _____

Injuries: _____

Parent/Guardian Signature: _____