

## St. Dominic Savio & Lone Star Hoops L.L.C. Presents...

## DINT MINI-





STATEMENT OF PURPOSE: This camp is meant specifically for boys and girls that are trying to enhance their basketball skills, improve their fundamentals or to start learning the game in its early developmental stages. Presented by LONE **STAR HOOPS LLC** in its **30**<sup>th</sup> **year**, this **"5-point mini-camp"** provides a fast-paced, Spring Break opportunity. It refers to "5-points" of the game- like the five points of a future star-to-be. These points include shooting, passing, ball-handling, rebounding and defense. The quick pace and intense energy of these three days of instruction promise to sharpen performance and put emphasis on the "reps and touches" needed to bring a ballers game to its top level!

WHO BY? Former Eagle Coach, Jan Jernberg, the Eagle Staff and veteran LSH coaches from all over the Texas area.

WHERE AT? ST.DOMINIC SAVIO CATHOLIC H.S...9300 Neenah Dr., Austin (off Parmer, down from Kelly Reeves FB Stadium).

**WHO FOR?** All basketball-playing boys and girls, currently in the 2<sup>nd</sup> – 8<sup>th</sup> grade, that love basketball and want to improve their game!

WHAT DATES? Monday thru Wednesday, March 13<sup>th</sup> – 15<sup>th</sup>, 2017

WHAT TIMES? 9am-4pm daily with lunch break at noon.

LUNCH? Campers can bring lunch or purchase GATTI'S, a snack & a drink for \$5. Inexpensive concessions provided periodically.

**HOW MUCH?** PRIOR TO MARCH 1<sup>st</sup>: \$100... AFTER MARCH 1<sup>st</sup>: \$130

WHAT ELSE? Camp t-shirt, balls and performance awards daily.

	ONE STAR HOOPS "5-POINT MINI-CAMP (MARCH 13-15, 201	17) REGISTRATION FORM
	,	Age: Sex:
Shirt Size (adult sized): XS S M L	XL 2XL Email Address:	
Address:		
	Zip:	FEES: Full amount is due before camp begins.
Phone Number:	School Attended:	Through March 3 <sup>rd</sup> : \$100
	Phone Number:	After March 3 <sup>rd</sup> : \$130
E-mail Address:		Paid by (check one):
		Check Credit Card:
In accordance with Savio H.S. and Lone Star Hoops L.L.C. policy, I give my consent for above named camper		amper Circle one: Mastercard Visa Discover
to participate in camp activity. I also consent for Savio H.S. or LSH L.L.C. to secure medical attention in		n #
event of an emergency. I will not hold Savio H.S. or LSH L.L.C. responsible for injury/liability and will secure		secure
adequate insurance for camp.		Exp. Date (mo/yr)/ CSC:
Signature:	Date:	(credit card payments must include an additional \$5 fee (PER CAMPER) to offset new bank administration
FOR MORE INFORMATION CONTACT:		charges).

Jan Jernberg: (512) 789-5351 lonestarhoops@gmail.com

ADDRESS CHECKS TO: LONE STAR HOOPS L.L.C. Send with the completed registration form to: 907 EAST PARK CEDAR PARK, TEXAS 78613