

ADDITIONAL INFORMATION

ATHLETIC DEPARTMENT

Pete Norman (815) 599-3465
pete.norman@highland.edu

Jodi Rogers (815) 599-3415
jodi.rogers@highland.edu

BASKETBALL

Luke Norman (815) 599-3463
luke.norman@highland.edu

Checks Payable To: *Highland Athletics*

Mail To: Highland College
Pete Norman, Athletic Director
2998 W. Pearl City Road
Freeport, IL 61032

Highland College Website:
www.highland.edu

Wear your camp T-shirt for
FREE admission to HOME Games

This program is not affiliated with Freeport School District 145

Highland Community College
2998 West Pearl City Road
Freeport, IL 61032



2024 Summer Sports Camp

BASKETBALL

June 10 – June 13, 2024



SPEND YOUR SUMMER WITH US!

NOTE FROM HEAD MEN'S BASKETBALL COACH, LUKE NORMAN

We are excited to personally invite you to the Highland Cougar Summer Basketball Camp! We are looking forward to bringing back the Summer Basketball Camps in our beautiful new air conditioned gym, and are certain that you will enjoy the experience, and have lots of fun!

Our Summer Basketball camps are specific to age, designed to help you develop the proper skills to be a successful basketball player. Having fun, while learning the fundamentals, skills, and techniques that basketball takes, are the basis of our camp instruction.

Our Cougar Coaches and staff take pride in offering the best and highest quality Camp in Northwest Illinois.

Spend some of your summer with us!

Luke Norman

CAMP REGISTRATION INFORMATION BY SPORT

<u>BASKETBALL CAMPS</u>	<u>DATE</u>	<u>TIME</u>	<u>FEE</u>
Session 1 -K-4th Co-ed	June 10-13	9-11 am	\$90
Session 2 -5th-8th Co-ed	June 10-13	1-3 pm	\$90

Website: highlandcougars.com
Follow us on Social Media
Twitter: @HighlandCCMBB
Facebook: Highland Cougar Athletics

Additional Information Contact:
Pete Norman (815) 599-3465

Checks Payable To: *Highland Athletics*
Mail To: Highland Community College
Pete Norman, Athletic Department
2998 West Pearl City Road
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2024 CAMPER REGISTRATION FORM
One Form Per Child

Participant's First Name _____ Last Name _____
 Date of Birth ___/___/___ Male Female
 Parent's First Name _____ Last Name _____
 Address _____ City/Zip _____
 Work Phone _____ School _____ Grade (Fall) _____
 Emergency Contact _____ Phone _____
 Special Concerns-Medical, etc. _____

(Youth Sizes) (Adult Sizes)
 T-Shirts: S M L XL S M L XL

CHECK THE CAMP(S) OF PARTICIPATION:

BASKETBALL
 Session 1 K-4th Co-ed
 Session 2 5th-8th Co-ed

PARENTAL AGREEMENT: I hereby request that you enroll my child _____ in the 2024 Highland Community College Sports Camps. I hereby release Highland, HCC Board of Trustees, and HCC employees of all claims on account of any injuries sustained by my child while attending the 2024 Sports Camps. Additionally, I agree to indemnify Highland, HCC Board of Trustees, and HCC employees for any claim that may hereafter be presented by my child as a result of such injuries.

Parent/Guardian Signature/ Date: _____
 _____ Date _____