

NORTH HILLS BOYS' BASKETBALL BOOSTERS CAMP - 2025
ALL BOYS ENTERING GRADES 1ST - 9TH IN THE FALL

*Sponsored by the North Hills Boys' Basketball Boosters, an independent non-profit organization.
 This camp is not affiliated with the North Hills School District.*

DATES: **Week #1** **Monday - Friday** **June 9 - 13**
 Week #2 **Monday - Friday** **June 16 - 20**

SITE: **NORTH HILLS MIDDLE SCHOOL GYMNASIUMS**

TIME: **9:00 a.m. to 12:00 p.m.**

GRADES: **BOYS ENTERING 1ST - 9TH GRADES IN THE FALL OF 2025**

COST: **\$100 FOR ONE WEEK** **\$175 FOR TWO WEEKS**
 ***PAID IN FULL AT TIME OF REGISTRATION**

DIRECTOR: **BUZZ GABOS** **HEAD BASKETBALL COACH**
 E-Mail: buzz.gabos1@gmail.com **Phone: 412.965.4101**

North Hills Boys' Basketball Boosters Camp - 2025

Checks payable to: NORTH HILLS BOYS' BASKETBALL BOOSTERS (NHBBB)
CAMP MUST BE PAID IN FULL AT TIME OF REGISTRATION.
Mail to: NHBB Boosters Camp, 771 Village Club Drive, Wexford, PA, 15090

PLAYER NAME	GRADE 8/25	CELL NUMBER/EMAIL	T-SHIRT SIZE

Camp Week(s) Attending _____ 6/9 to 6/13 _____ 6/16 to 6/20

Parent(s)/Guardian(s) Camp Release Form

I/we, the parent(s)/guardian(s) of the registrant, a minor, agree that I/we and the registrant will abide by the rules of the North Hills Boys' Basketball Boosters Camp, its affiliated organizations, and sponsors. Recognizing the possibility of physical injury associated with basketball, and in consideration of North Hills Boys' Basketball Boosters Camp accepting the registrant for its basketball camp, I/we hereby release, discharge, and/or otherwise indemnify North Hills Boys' Basketball Boosters Camp, its officials, sponsors, and associated personnel, including the owners of the gymnasium and facility utilized for the camp, against any claim as a result of the registrant's participation.

Signature of Parent/Guardian	Date Signed

Check # _____ Amount Paid _____