

# Ball Handling Camp



1090 N. Fiesta, Gilbert, AZ 85233  
[www.arizonabasketballacademy.com](http://www.arizonabasketballacademy.com)  
480-633-6097



Ball Handling is not just dribbling; it also entails catching and passing the basketball. If you can't protect the basketball, it leads to turnovers. We will teach you how to be strong with the ball and fundamentally sound. This camp also includes how to be a creative, aggressive, and a smart ball handler. See you there!

**July 2, 2009      1:00 pm –4:00 pm**

**\$50 Individual Player   \$40.00 Bring a Buddy**

**Make checks payable: [APBA](#)**

\$25 Service fee will be applied for Returned Checks. \_\_\_\_\_ (Initial)

**Grades: 7<sup>th</sup> – 12<sup>th</sup>**

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Player's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ M/F \_\_\_\_\_

Parent(s) Name \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Would you like us to add you to our email list? Yes/No

**Medical Release Form** Player's Name \_\_\_\_\_ In accordance with the Arizona Premier Basketball Academy LLC policy, I give my consent for the above named boy/girl to participate in all APBA activities. I also consent to APBA securing medical attention/transportation deemed necessary in an emergency. I will not hold the Arizona Premier Basketball Academy LLC responsible for injury or liability and will secure adequate personal insurance for APBA duration. The APBA will not be responsible for medical costs. I recognize there are risks associated with strenuous physical exertion when engaging in basketball activities. I certify to the best of my knowledge my child's physical condition is satisfactory to participate in physically demanding activities. I, the undersigned, have read this release and understand all its terms.

Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Send Registration and Payment to: Arizona Premier Basketball Academy  
P.O. Box 1581 Gilbert, AZ 85299**