



Elite Prospect Camp

June 9th, 2020



Date: Tuesday, June 9th
Time: 1:00 - 4:00 pm
Cost: \$50 (includes lunch and a t-shirt)
Location:
Kolf Fieldhouse
785 High Ave
Oshkosh, WI
Who: Camp is open to rising Sophomore - Seniors

Reasons to Attend:

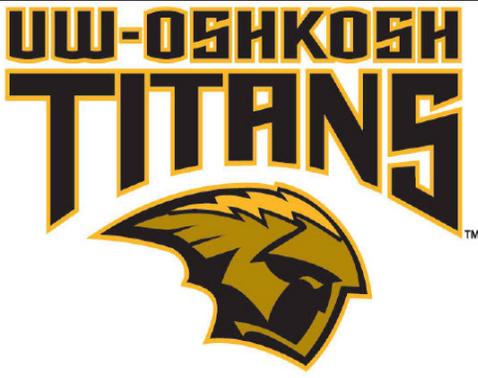
1. Quality instruction from UWO Coaching Staff assisted by our current players.
2. High Level Competitiveness: compete and learn with other highly motivated players
3. College Recruiting Insights and UW-Oshkosh Campus Visit: Tour campus and see why UW-Oshkosh is a Great Opportunity!

Schedule:

12:30 pm: Registration (light lunch will be provided)
1:00 pm: Welcome and Recruiting Informational Session and Q&A with Coach Lewis
1:15 pm: Warm-up and Start of Camp
4:00 pm: End of Camp
4:10 pm: Optional Tour of Campus with Coaching Staff and Players

Registration: Registration is available online at www.uwoshkoshsportscamps.com OR by mailing form on reverse side with check for \$50.

Questions Contact: Assistant Coach Casey Korn
kornc@uwosh.edu (636)359-9959



Elite Prospect Camp Registration Form

Camper's Name: _____

Address: _____

City: _____

St: _____ Zip: _____

Camper Cell Phone: _____

Camper Email: _____

Parent/s' or Guardian/s' Name: _____

Parent/s' or Guardian/s' Phone: _____

High School: _____

AAU: _____

Age: _____ Grade: _____

Height: _____ Weight: _____ Position: _____

Shirt Size:

Adult S _____ Adult XL _____

Adult M _____ Adult XXL _____

Adult L _____

Mail Form and payment (\$50) to:

UW-Oshkosh Sports Camps
Kolf Sports Center
800 Algoma Blvd.
Oshkosh, WI 54901

OR

Online Registration:

www.uwoshkoshsportscamps.com/mensbasketball

Checks Payable To:

UW-Oshkosh Sports Camps

I verify that my child has been checked by a licensed physician and is physically able to participate in the basketball camp. I agree to allow my child to be treated by a licensed physician while attending, if necessary, and to assume all costs related to such treatment. I authorize the disclosure of medical information to my insurance company for the purpose of claim.

Parent/Guardian Signature: _____