



“Get Ready For A TON Of Summer Fun!”

# BOB CANTU'S 23rd Annual Basketball Camp



805-546-1448

www.CantuCamps.com

Director: Coach Bob Cantu

Session 1: Paso Robles/Paso Robles High School	June 17-20	9am-12 noon	Ages 4-12
Session 2: SLO/Mission Prep High School Gym	June 24-27	9am-12 noon	Ages 4-12
Session 3: SLO/Mission Prep High School Gym	July 15-18	9am-12 noon	Ages 4-12

Tuition: \$195 (\$175 Additional Family Member.) \*Early Drop-off is available for \$25 extra per child\*

**Camp Info:** Bob Cantu, Central Coast native, former Assistant at University of Portland, and former USC Head Coach, directs camp along with his experienced camp staff. Coaches consist of former campers, current college players and coaches. The camp covers basic fundamentals of shooting, ball handling, passing, rebounding, and defense. Instruction is tailored to each individual child's experience and skill level. Campers receive a camp T- Shirt and basketball. Camp concludes with a prize shoot-out and Awards Ceremony. **SPACE IS LIMITED, SO DON'T WAIT...REGISTER TODAY!**

## BOB CANTU FUNDAMENTAL BASKETBALL CAMP REGISTRATION 2019

Session 1       Session 2       Session 3

- \$195 for one child
- \$175 each additional child
- Do you want Early Drop-Off (8:00am - Add \$25 per child) \_\_\_\_\_

Name of Player \_\_\_\_\_ Age \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

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

Parent's Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email \_\_\_\_\_

1<sup>st</sup> Time Camper? \_\_\_\_\_ Referred By (Parent & Camper) \_\_\_\_\_

I, the undersigned, acknowledge that Bob Cantu and the Fundamental Basketball Camp merely sponsor the above-named activity and realize that no medical insurance is provided. I assume all risks and hazards thereto, including those arising in course of transportation to and from the location and hold any of its employees, and volunteer personnel harmless from any claims or illness arising out of or in any way connected with the above-mentioned activity.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

CREDIT CARD PAYMENT: Visa MC AMEX Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature of Cardholder \_\_\_\_\_

CHECK PAYMENT: Make check out and send to Bob Cantu Fundamental Basketball Camp

Send payment to: PO Box 13106 San Luis Obispo, CA 93406