

Pittsford Basketball Camp

Go Knights! Go Vikings!

21 Combined Sectional Championships

The mission of the Pittsford Basketball Camp is to provide an atmosphere for fun and learning. Daily station drills will be used to breakdown the fundamental aspects of the game as well as teach game situation skills. A good balance of game competition and fundamental drills can be expected. This camp also provides an exciting opportunity for the coaches and athletes within the local school district to connect and create relationships that will hopefully last through high school and beyond. See the camp website for further information.

Camp Directors: Bob Nally-Pittsford Mendon Boys Varsity, 2015-present

Derrick Kemp-Pittsford Sutherland Boys Varsity, 2024-present

Contact: (585)750-9497.... bobnally@gmail.com www.pittsfordbasketballcamps.com

Pre-registration: The registration form and a non-refundable \$60 deposit is encouraged by June 26, 2026 in order to guarantee space is available. However, late registration will likely be possible. Full balance accepted prior to but, no later than the first day of camp.

Check payable: Viking Hoops
8 Lands End Rise
Pittsford NY 14534

Venmo: @Bob-Nally

* Refund (less \$60) is available up to one week prior to camp start date by notifying Camp Director.

Cut here-----

Registration Form

Name: _____ **Age:** _____ **Grade Fall '26** _____

Address: _____ **School** _____

Parents Name: _____ **Phone:** _____ **Email:** _____

Emergency Contact: _____ **Phone:** _____

Check Line Below

<u>Sessions:</u>	<u>Grade</u>	<u>Site</u>	<u>Time</u>	<u>Fee</u>	<u>Shirt Size: (Circle One)</u>
_____ June 29-July 2	2 nd – 5 th	CRMS	9am-11:30am	\$160	YS YM YL
_____ July 6-9	6 th – 8 th	MHS	9am-12pm	\$200	S M L XL

It is understood that the Pittsford Basketball Camp is not responsible for accidents resulting in medical, dental, or other expenses including loss of personal items. As legal Guardian of the participant below, I grant permission to provide emergency treatment if necessary. The participant below and his/her family assume the risk of injury while participating, therefore, releasing Pittsford Basketball Camp, camp staff, the camp coordinator, and the Pittsford Central Schools from liability.

Parent/Guardian's Signature:

X _____ Date: _____ Insurance Provider _____

Policy Number: _____