

North Pittsburgh Summer Shootout

June 23rd – July 17th
Mondays, Tuesdays, & Thursdays
Boys' and girls' grades 1st-5th
Bring your own basketballs
10am to 1130am

HELD AT NORTH PARK BASKETBALL COURTS Please arrive 15 minutes early by the assigned time. Times and days will be announced June 19th.

Shootout \$75 per player (\$50 for each additional sibling)

(Includes t-shirts, associated fees, fundamental instruction, insurance, payment to coaches)



The **North Pittsburgh Summer Shootout** is designed to help boys and girls learn and enjoy the game of Basketball. It is organized and run by Christopher Lebakken, Coach Lebakken has had coaching stints at Pine Richland, Shaler, and Aquinas Academy. Kids in each age group will receive instruction from respected basketball coaches & players focusing on fundamentals (dribbling, shooting, passing, defense, and teamwork. Players will get to use those lessons in games and competitions throughout the Shootout. Each day is usually divided for boys and girls to work on skills and game activities. If you have questions, contact Coach Lebakken at 412-389-1867 or cfro0615@gmail.com

Registration & Parent/Guardian Authorization - <https://forms.gle/WuMDUmAUhWudUz1M8>
Please mail this completed form, with payment, to North Pittsburgh Summer Shootout c/o Coach Christopher Lebakken, 192 Mary Ave, Pittsburgh, PA 15209. **Make checks payable to Christopher Lebakken.**

PLEASE REGISTER BY June 23rd

Name _____ Grade in September _____
T-Shirt size (specify youth or adult) _____ Gender _____

Address _____ email _____

I hereby approve of my child's attendance and participation in the North Pittsburgh Summer Shootout and certify that he is in good health and able to participate in all program activities. I authorize that the director's act for me according to their best judgment in any emergency requiring medical attention for which service I will pay. I hereby waive and release the county of Allegheny, North Pittsburgh Summer Shootout, Christopher Lebakken and the Shootout staff from any and all liability for any injuries or illness incurred at the camp.

Parent/Guardian signature (ink only) _____ Phone no. _____ * Please attach a note explaining any physical limitations, medical conditions, required medications, and/or any other special Circumstances of which the camp staff should know.