

2017 Bob Hoffman Basketball Team Camp Dates and Coach's Packet of Information

June 22nd - 24th
Thursday-Saturday

Camp Goal:

Mercer University Men's Basketball wishes to provide an opportunity through Bob Hoffman Basketball Camp for your team(s) to compete against quality players and coaches in order to improve your program. It is a great time for your team(s) to improve their chemistry, as well.

Dates and Times:

We have one, team camp option this year; June 22nd – 24th (Thursday-Saturday). All dates will have games starting at 8:00 or 9:00 AM, continuing through the evening hours.

Participants:

High schools (Varsity, Junior Varsity, and Freshman teams) of all classifications will be here. We serve schools of all sizes from around the state of Georgia. Our camps have entertained teams from other states in the past, as well. Everyone has an opportunity to play varied levels of competition.

Athletic Trainers:

An athletic trainer from the staff of Mercer University will be on hand to handle any injuries or medical issues that may arise.

Facilities:

During Team Camp we have 5, full-size, air-conditioned courts available for use that are located in Mercer's University Center. We also have access to courts in alternate locations which are easy to locate and get to. Directions will be provided for your convenience when necessary for travel.

Transportation:

All Mercer facilities are within walking distance. Shuttle service will be provided to alternative locations for coaches and their team members, if necessary.

Food and Lodging:

For teams boarding on campus, lodging is in a Mercer University, air-conditioned dorm. Dorms are within walking distance of the University Center and cafeteria. For teams boarding on campus, meals will be provided. Commuting teams have the option and convenience of purchasing meals served in Hawkins Arena. The cost is \$5 per meal, per person. Contact Jonathan Howard for meal information.

Games, Officials, and Rules:

Unless a coach requests otherwise, each team is guaranteed 3 games on the 1st day, 3 games on the 2nd day, and 2 games on the 3rd day of camp. A huge feature of our camp is the fact that we use GHSAA officials to officiate games. All games follow GHSAA Game Rules, with minor exceptions. We try to make the games as much like regular season games as possible.

Scheduling:

Scheduling for camp will not start until the week prior to each camp's start date. This is necessary because there are always last minute participation changes. If you have any special scheduling requests, contact Jonathan Howard 478-550-0954.

Pricing:

There are different options for your 2017 participation. All teams pay a "Referee Fee" in addition to the appropriate team fee(s). Options are listed below.

<u>Option 1:</u>	<u>Cost</u>	
Commuting	*\$75 Mandatory Referee Fee *\$575 for 1 team, *\$975 for 2 teams *\$1275 for 3 teams *\$1475 for 4 teams	8-game guarantee and t-shirts (up to 15 t-shirts per team)
<u>Option 2:</u>		
Boarding on Campus	*\$75 Mandatory Referee's Fee *\$210 per player	8-game guarantee and t-shirts
<u>Option 3:</u>		
Single Days	*\$25 Per Day Mandatory Ref. Fee *\$195 per team, per day	3-game guarantee and t-shirts for teams participating 2 or more full days (up to 15 t-shirts per team).

Other Notes:

- ✓ Boarding rates include lodging and meals.
- ✓ Coaches of boarding teams stay free (head coach and assistant or 1 coach per team). Additional coaches (and non-participating, male children of coaches) may come and pay 1/2 the boarding rate (\$105).
- ✓ Again, each team must pay the Referee Fee in addition to camp fees.
- ✓ The submission of your Referee Fee secures a spot for your team(s) in Team Camp. Balance owed can be paid by mail prior to or upon arrival.
- ✓ [Coaches must turn in a completed \(and witnessed\) 2017 Mercer University Facilities Usage Form/Bob Hoffman Basketball Camp Release and Waiver of Liability \(attached in this packet\) at check-in for each and every participant. These should be completed before leaving home, because they must be signed by a parent or legal guardian.](#)
- ✓ For preparation purposes, if at all possible, we need to know by June 8th if you plan to attend Team Camp. Send your deposit in to hold your spot.
- ✓ We ask that players NOT bring any valuables with them to camp. Bob Hoffman nor Mercer University will be responsible for lost or stolen items!

The following 3 pages must be submitted.

2017 Mercer University's Bob Hoffman Basketball Team Camp Registration Form
(Send in with Referee Fee to reserve your school's spot)

School Information: Please write legibly.

School: _____

School Address: _____

City: _____ State: _____ Zip: _____

Head Coach's Name: _____

Cell Phone: _____ School Phone: _____ Home Phone: _____

School Email Address: _____ Alternative Email: _____

Teams You Will Have Attending (check all that apply):

One Varsity _____ One JV _____ One Freshman _____
Two Varsity _____ Two JV _____ Two Freshman _____

Pricing Option (Check One):

Option 1 _____

Commuting

*\$75 Referee's Fee

Plus:

*\$575 for 1 team

*\$975 for 2 teams

*\$1275 for 3 teams

*\$1475 for 4 teams

Option 2 _____

Boarding on Campus

*\$75 Referee's Fee

Plus:

*\$210 per player

Option 3 _____

Single Days

*\$25 per day Referee's Fee

Plus:

*\$195 per team, per day

I, _____, the coach of _____, understand that a M.U. Facilities Usage Form/BHBC Team Camp Release and Waiver of Liability must be filled out and signed by a parent for each of my participating students before leaving home. I will collect those and understand that those must be turned in upon check-in at Team Camp.

Signature: _____

Date: _____

Please make checks payable to: "Bob Hoffman Basketball Camp"
Send this form, along with the Referee's Fee, to reserve your place in camp to:

Bob Hoffman Basketball Camp
Mercer University 1501 Mercer University Dr. Macon, GA 31207

Contact Information:

Head Coach: Bob Hoffman 478-301-5211/478-954-9186 Camp
Director – Jonathan Howard 478-550-0954
Men's Basketball Office Fax: 478-301-5222

2017 Bob Hoffman Basketball Camp Tabulation Sheet
For Team Camp: June 22-24, 2017

School: _____

Head coach's name: _____

Best phone number to be reached at: _____

Email most often checked: _____

Tabulation for Boarding Teams

Number of players _____ X \$210.00 \$ _____

Extras (coaches/children of coaches) _____ X \$105.00 +\$ _____

Referee fee of \$75 if not yet paid +\$ _____

Total cost for your school =\$ _____

Tabulation for Commuting Teams

Number of teams (1/\$575, 2/\$975, 3/\$1275, 4/\$1475) \$ _____

Referee fee of \$75 if not yet paid +\$ _____

Meals: _____ players X _____ number of meals X \$5.00 +\$ _____

Total cost for your school =\$ _____

Tabulation for Single-Day Teams

Number of teams/day one _____ X \$195.00 + \$25 Referee fee \$ _____

Number of teams/day two _____ X \$195.00 + \$25 Referee fee \$ _____

Number of teams/day three _____ X \$195.00 + \$25 Referee fee \$ _____

Meals: _____ players X _____ number of meals X \$5.00 +\$ _____

Total cost for your school \$ _____

Meals are not provided for teams that commute, however, meals that are served in Hawkins Arena can be purchased for \$5 each per player. These are to be paid for during the check-in process.

This form must be completed by a parent, signed, and turned in for each individual camper at registration!!
2017 MERCER UNIVERSITY FACILITIES USAGE FORM/BOB HOFFMAN BASKETBALL TEAM
CAMP RELEASE AND WAIVER OF LIABILITY

Camper Name _____ Age _____ DOB ____/____/____
 Street Address _____ City _____
 State _____ ZIP _____ School _____ Grade _____
 Parent/Guardian Name _____ Parent's Phone _____
 Alternative Phone Number _____ Email Address _____
 Emergency Contact _____ Relation to Camper _____
 Phone () _____ Secondary Contact _____ Phone () _____
 Medical Insurance Carrier _____ Policy Number _____
 Insured/Holder Name _____ Group Number _____
 Primary Physician's Name _____ Phone () _____

On next 4, please use back of paper if more room is necessary.

Physical Limitations (asthma, diabetes, etc.) _____
 Allergies (food/medicine) _____
 List all medications taken on a daily basis _____
 Additional information (surgeries/serious injuries in last 5 years) _____

I, _____ (printed name of "Camper" if over 18 years of age), know that participation in sports may result in serious injury or death, and protective equipment does not prevent all injuries to players. I hereby waive, release, absolve, and agree to hold harmless Bob Hoffman, Mercer University, its administrators, employees, coaches, students, and staff, as well as the organizers, supervisors, volunteers, sponsors, participants and persons transporting me to and from activities from any claim arising out of any injury to myself or my child, whether the result of negligence or for any other cause.

I, _____, the parent(s)/guardian(s) of the above-named minor camper, do hereby:

- ✓ give my (our) approval for Camper to participate in activities utilizing Mercer University facilities and Mercer University athletic facilities. I (We) have read paragraph 1. above and agree to hold harmless Bob Hoffman, Mercer University, its administrators, employees, coaches, students and staff, as well as the organizers, supervisors, volunteers, sponsors, participants, and persons transporting my (our) Camper to and from activities, harmless from any claim arising out of any injury to my (our) Camper, whether the result of negligence or for any other cause.
- ✓ authorize any medical or surgical treatment which may be necessary in an emergency, and in my absence, for the well-being of the above mentioned minor. I agree to hold Mercer University and Bob Hoffman Basketball Camp harmless.
- ✓ understand that accident/medical insurance coverage is NOT provided by Mercer University or Bob Hoffman Basketball Camp. If injured while at Mercer University, on campus or in the facilities, I (we) understand that I (we) are responsible for any/all medical expenses and/or insurance coverages.
- ✓ understand that property damages and general liability insurance are NOT provided by Mercer University or Bob Hoffman. I (We) understand Mercer University nor Bob Hoffman are responsible for property damage resulting from the use of Mercer University facilities or athletic facilities. I (We) will be responsible for the cost of any property damage caused by our child.

Print Full Name of Camper	Signature of Camper <i>(only if 18 or older)</i>	Date
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Printed name of Parent/Guardian	Signature of Parent/Guardian	Date
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Mandatory Printed Name of Witness	Mandatory Signature of Witness	Date
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