



25th Annual

St. Mary's Springs Ledgers 2024 Boys Basketball Camp

Camp Director: Kyle Krueger, Head Coach
kkrueger@smsacademy.org (920)-948-3466

Follow camp on Twitter: @CoachKKrueger @SpringsHoops

DATES: Monday, June 24 - Thursday, June 27 **** Grades are for the fall of the 2024-25 school year****

| | | |
|------------------|---------------------|-----------------------|
| Grades 2 - 3 | 9:00 am - 10:00 pm | Baker Gym (ES/MS Gym) |
| Grades 4 - 5 - 6 | 10:30 am - 12:30 pm | Hutter Gym (HS Gym) |
| Grades 7 - 8 - 9 | 1:00 am - 3:00 pm | Hutter Gym (HS Gym) |

- The camp will be held at St. Mary's Springs Academy - : 255 County Road K, FDL, WI 54937

PHILOSOPHY: We have designed the basketball camp to meet the needs of players of all ability levels. Coach Krueger and his staff will utilize years of coaching experience at the high school level to help each individual improve and to teach them how to continue to improve after camp has concluded. Also, present and former Ledger players will be used to demonstrate skills and share their experiences in basketball at the high school level. Camp will be planned to resemble our high school practices.

CAMP GOAL: Our goal is to provide quality instruction of the fundamentals of basketball for grade school players. The emphasis of our camp will be to help the players improve their skills for next year and future seasons using a *small sided games approach*.

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|---------------------------|----------------------|-------------------------------------|
| CAMP FEATURES: | Camp T-shirts | Competitive full & half court games |
| Chalk talks by coaches | Shooting instruction | Passing & ball handling |
| Individual & team defense | Individual workouts | Contests & awards |

REGISTRATION: Be sure to register early. Registration deadline is **FRIDAY, June 14, 2024.**

CAMP COST: \$ 70.00 Grades 4-9 \$35.00 Grades 2-3

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| | | |
|---------------------|------------------------|--------------|
| NAME _____ | GRADE '24-'25 _____ | HEIGHT _____ |
| ADDRESS _____ | CITY _____ | ZIP _____ |
| HOME PHONE _____ | WORK PHONE _____ | |
| CELL PHONE _____ | SCHOOL LAST YEAR _____ | |
| EMAIL ADDRESS _____ | | |

T-SHIRT SIZE (circle one): Youth Sizes: M L Adult Sizes: S M L XL XXL

Checks may be made payable to: **SMSA Camps**

Please send registration to: **Kyle Krueger
59 Cumberlynn Dr.
Fond du Lac, WI. 54935**

PARENT'S STATEMENT: In case of an accident or emergency, I hereby authorize the camp directors to act according to their best judgement in a medical emergency. I accept full responsibility for liability and the cost of treatment.

PARENT SIGNATURE _____ **DATE** _____