

"Pacesetter All-Skills Championship Basketball Camp"

**PACESETTER
SPORTS
PRESENTS...**



John Carlson
MN Coach of the Year
Litchfield
3-time state champion 2000, 2002, 2003

Tom Vix
Rushford-Peterson boys head coach
MN Coach of the Year
11-time Section Coach of the Year



**Rochester Community
& Technical College**
Tuesday-Thursday
July 17-19
Tues: 10am-8pm • Wed: 8:30am-8pm • Thurs: 8:30am-4pm
Player Fee: \$250 - 28 hours, plus 5 meals & 7 snacks
2 Nights Housing (optional): Additional \$80 (includes breakfast)
Use form below or register online
[@ www.pacesettersports.net](http://www.pacesettersports.net)

For players entering grades 6 - 10

320-243-7460 • info@pacesetternet.com • Facebook/Twitter/Instagram: Pacesetter Basketball

SKILLS: Shooting form • Jump shooting (age appropriate) • shooting off dribble and pass • ball handling against pressure: crossovers, between legs, behind back, reverse pivot, hesitation move • penetrating lane • sharp passing • passing to post • passing on fastbreak • filling lanes • reading defenses in half court & full court • footwork: cutting to basket w/o ball, reverse pivoting, setting screen-roll or go • boxing out • offensive rebounding • breaking to wing • backdoor cut • one-on-one facing moves: touch & go, touch & cross, touch & shoot, dribble & pop, ball fake & go • post moves: 9 options • denying wing break • denying lane cuts • denying post positions • ball pressure in full court • embracing hard work and 100% effort • embracing good sportsmanship • being a team player • 1-on-1 • 2-on-2 • 3-on-3 • 5-on-5

Rochester Community & Technical College
Rochester, MN
Tues.-Thurs. July 17-19

All-Skills Championship Basketball Camp
Questions? Email info@pacesetternet.com
or call 320-243-7460

Circle one:
Player Fee: \$250 *or*
Player/Housing Fee: \$330

Name _____ Grade in 2018-2019 _____ Circle Gender: M F

School _____ Email Address _____
REQUIRED! Confirmations will be sent via email.

Parent Cell # _____ Player Cell # _____

Mailing Address _____
Street City State Zip

Circle T-Shirt Size: Youth: S M LG Adult: S M LG XL Roommate Request _____

Parent/Guardian _____ (signature) _____ (print) _____ (date)

* My child has permission to participate in Pacesetter camps with the understanding that neither the facility host nor Pacesetter Sports will be held liable for any injury incurred at the camp. I also understand that any photos taken may be used for promotional use by Pacesetter and mailing and email address provided may be used by Pacesetter to send information to our family.

Send this form with check to: Pacesetter, PO Box 222, Paynesville, MN 56362 • Registration also available online at www.pacesettersports.net