

San Ramon Valley High School

2026 Women's Basketball Skills Camp

3rd, 4th, 5th, 6th, 7th, 8th Grades



Fundamentals of Basketball Skills Camp

Hosted by: SRV Women's Basketball Program

Location: San Ramon Valley High Gym- **Auxiliary Gym**

Dates: June 15 -July 1 **M-T-W-Th**
Time: 8:30am - 11:00am
Cost: \$250.00

Camp Objective: Our campers receive daily instruction, skill development, conditioning, and FUN.

Instruction: Ballhandling, Shooting, Passing and Game Knowledge

Cost: **\$250.00 per participant per session**

Next Steps: Complete and sign the attached application and return with the following:

- Check payable to SRVHS Women's Basketball for \$250.00 per session
- Read, sign and return the **"Waiver of Liability"**
- **ALL FEES/ WAIVERS ARE DUE BY June 1, 2026 to reserve a spot. You will receive an email confirming your participation/session chosen.**
- **Mail or Deliver to:** Women's Basketball Program Director
SRV High School 501 Danville Blvd Danville, Ca 94526

Pay on line

<https://srvhs.futurefund.com/go/65242-women-s-basketball-youth-camp>

attach your on line confirmation with your application

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The San Ramon Valley High School Women's Basketball Camps serve as a fundraiser for the Women's Basketball Program. The funds from the camp will be used for general operating expenses for the Women's Basketball Program. The Summer Camp fund raising opportunity is not intended for summer employment for coaches.
Summer Camps are open to everyone!!!

Mail THIS PAGE with Your Check and **Waiver of Liability **

CAMPER NAME (Print) _____ PARENT SIG. _____

Parent Name (Print) _____ Age _____ Grade Entering _____

Address _____ City _____ Zip _____

Insurance Carrier _____ Policy Number _____

Parent E-Mail
(Print) _____

Please Circle **Youth** SHIRT SIZE: **SMALL** **MEDIUM** **LARGE** **XL**

Home Phone # _____ Work Phone # _____

Emergency Phone # _____ Cell Phone # _____

Deliver To:

**Women's Basketball Program Director
SRV High School
501 Danville Blvd Danville, Ca 94526**

Email to: jcristiano@axiomdesign.com



San Ramon Valley Unified School District
EXTRA CURRICULAR ACTIVITIES VOLUNTARY PARTICIPATION FORM and
ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize myself/my son/daughter, _____ to participate in the district sponsored activities of _____. I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that participation in these activities is completely voluntary and as such is not required by the District for course credit or for completion of graduation requirements.

I understand and acknowledge that in order to participate in these activities, my son/daughter and I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities.

I understand, acknowledge, and agree that the San Ramon Valley Unified School District, its employees, officers, agents, or volunteers shall not be liable for any injury/illness suffered by myself, my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity and I voluntarily assume all risk, known or unknown, of injuries, howsoever caused, even if caused in whole or in part by the action, inaction, or negligence, of released parties to the fullest extent allowed by law.

The undersigned agrees to defend, indemnify and hold harmless the San Ramon Valley Unified School District, its Board of Trustees, officers, agents and employees, individually and collectively, from and against all costs, losses, claims, demands, suits, actions, payments and judgments, including legal and attorney fees, arising from personal or bodily injuries, property damage or otherwise, regardless of and however caused, brought or recovered against any of the above that may arise for any reason from or during or be alleged to be caused by the undersigned's (use/occupancy of District's facilities, furniture or equipment, or nature of activity).

I acknowledge that the above named participant is in good health, and fully able to participate in the activities, including activities which are strenuous in nature.

I have carefully read this VOLUNTARY ACTIVITIES PARTICIPATION FORM and as a participant and that I understand and agree to its terms.

Parent/Guardian Date

Student Signature Date

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file before a participant will be allowed to participate in the above extra-curricular activities.

Reviewed: March 2014

WAIVER OF LIABILITY