



Welcome to the PGC Shooting College.

Now that you've signed up, there are a few things you need to do to make sure you're ready...

FORMS TO COMPLETE:

Complete the Medical Release and Liability Waiver and bring this form with you to check-in. DO NOT mail the form to us in advance. Keep this entire packet in a safe place until you come to your short course.

DROP-OFF AND PICK-UP TIMES:

Check-in is from 5:15pm-5:45pm on Friday evening. The course will wrap up on Saturday evening at 8:30pm. Players may be picked up between 8:30pm-8:45pm.

Visit www.pgcbasketball.com/schedule-locations and click on the name of the facility for your session for check-in and check-out details specific to your session.

FRIDAY SCHEDULE:

- 5:15pm-5:45pm Check-in
- 5:45pm-6:00pm Optional meeting for parents (The Director of the course will provide an overview of the session and address the most frequently asked questions.)
- 6:00pm-9:00pm Classroom and Gym Session
- 9:00pm-9:15pm Closing and Departure

SATURDAY SCHEDULE:

- 8:30am-8:45am Arrival
- 9:00am-12:00pm Classroom and Gym Session
- 12:00pm-1:00pm Lunch
- 1:00pm-4:00pm Classroom and Gym Session
- 4:00pm-5:00pm Dinner
- 5:00pm-8:30pm Classroom and Gym Session
- 8:30pm-8:45pm Closing and Departure

MEALS AND ACCOMMODATIONS:

Meals and accommodations are not included. Athletes should bring a lunch on Saturday or purchase lunch from a nearby restaurant. Pizza can be purchased for dinner on Saturday.



PREPARATION FOR PGC:

We recommend that you come to your session in the best shape possible. The ideal way to prepare for your session is to complete our **Pre-PGC 30-Day Challenge**. Visit pgcbasketball.com/online-training/preview to begin your challenge — today! Work hard and prepare yourself well – you’ll be glad you did.

HYDRATION:

Drinks lots of water in the days leading up to your PGC session. Being well-hydrated will reduce your chances of injury and will reduce your likelihood of getting run-down during the rigorous on-court sessions each day.

THINGS TO BRING WITH YOU TO PGC:

- A **basketball** with your name on it (we will only be playing indoors)
- Clothes (basketball shoes, shorts, shirts, socks, etc.)
- Pens and/or pencils and a notebook
- Athletic tape - if you have an injury that requires it
- A water bottle with your name on it
- Your completed **Medical Release and Liability Waiver Form**

ADDITIONAL ITEMS:

● **Healthy Snacks**

As athletes typically get hungry after each gym session, we recommend bringing healthy snacks.

● **Extra Spending Money**

There will be PGC gear on sale at check-in and check-out, so we recommend bringing extra money.

INJURIES:

If you are injured prior to your short course, we hope that you will still attend. Your experience at PGC is not dependent on your ability to play on-court. Please contact us if you need to discuss your situation further. If an emergency arises with an athlete during the session, the athlete will be referred to a local medical facility and parents/guardians will be notified.



INTERNATIONAL ATHLETES:

If you are an athlete attending a short course in a country that you are not a resident, you must purchase international travel insurance and provide a certificate of coverage to PGC two weeks prior to the start of your short course. The certificate of coverage can be faxed or emailed to the contact information listed on the following page.

CANCELLATIONS:

If you cancel for any reason **up to 30 days before your session**, you will receive a **PGC credit** that can be applied toward any course in 2014. You can also transfer this PGC credit to a family member, teammate or friend, or you can donate your credit to an underprivileged athlete.

If you cancel for any reason **within 30 days of your session**, you will receive a **PGC credit** for the total amount paid, **minus a \$75 cancellation fee**. If you cancel for any reason **within 7 days of your session**, you will not receive a credit. If you cannot attend your course due to a sickness or injury, our cancellation policy still applies. More flexible cancellation options are available with the purchase of Tuition Protection.

TUITION PROTECTION – “Our Peace of Mind Policy:”

PGC offers **Tuition Protection**, available **only** at the time of registration, for \$25 per participant for short courses. If you cancel any time **up to 30 days before your session**, Tuition Protection **guarantees** you a **full refund of tuition fees**. Cancellations **within 30 days of your session** will receive a **refund minus a \$75 cancellation fee**. If you cancel for any reason **within 7 days of your session**, you will receive a **PGC credit minus a \$75 cancellation fee**. This PGC credit can be applied toward any course in 2014. You can also transfer this PGC credit to a family member, teammate or friend, or you can donate your credit to an underprivileged athlete.

QUESTIONS:

The [Details and Info](#) page on our website has the answers to many commonly asked questions, but if you have questions that you cannot find the answers to online or in this packet, feel free to contact us.

CONTACT US:

- **By Email** - info@pgcbasketball.com
- **By Telephone** – 1-866-338-2308
- **By Mail** –
PGC Basketball
P.O. Box 514
Belton, TX 76513

www.pgcbasketball.com



MANDATORY MEDICAL RELEASE AND WAIVER FORM

Athletes without a completed medical release waiver will not be allowed to participate in gym sessions.

Athlete First Name	Last Name	Gender	Birth Date
Address	City	State	Zip Country
Parent / Guardian First Name(s)	Last Name	Dates Attending PGC	
Parent's Day Phone #	Parent's Evening Phone #	Parent's Cell Phone #	
Name of Emergency Contact (other than parents)		Emergency Contact Phone	
Health Insurance Company <i>(Canadian athletes - only list your health card number)</i>		Policy Number	
PLEASE MAKE A COPY OF YOUR INSURANCE CARD AND ATTACH TO THIS FORM <i>(If you have one).</i>			
Please supply any other pertinent medical information, such as allergies, medications, or pre-existing conditions:			
<p>WAIVER:</p> <p>I, the parent/guardian of the individual, a minor (the "Athlete"), do hereby permit the Athlete to participate in a PGC course and certify that the Athlete's physical condition is sufficient for full participation. I understand that the Athlete's participation in PGC involves an element of risk and a possible danger of accidents. I also understand that the Athlete's participation at PGC may include activities involving athletes of different ages participating together, and also those of the opposite gender. If an emergency arises at any point during the session, I grant PGC permission to provide transportation to and from a medical facility, or airport or bus station, as needed. I assume all risk and agree to hold harmless PGC from all claims resulting from accidents and injuries that arise from transportation provided by PGC. Knowing all these risks, I hereby assume these risks and I hereby release and discharge Point Guard College LLP, More Than Hoops LLP, More Than Hoops Inc. and DE10 LLC, from any and all liability resulting from the Athlete's participation in any aspect of PGC. I understand it is my responsibility to inform PGC staff of any medical conditions or any other special needs the Athlete might have and will notify the appropriate individuals of any health issues that might in any way affect the Athlete's active or passive participation in a PGC course. I hereby assume responsibility for any and all costs associated with treatment of the Athlete for any injury or health issue that arises during the Athlete's participation in a PGC course. I understand that PGC Basketball is not responsible for the supervision or safety of the Athlete if the Athlete leaves the campus for any reason during the course, including meal breaks, and I agree to assume all risk and hold harmless Point Guard College LLP, More Than Hoops LLP, More Than Hoops Inc., DE10 LLC, and all directors, coaches, staff members, volunteers and heirs from all claims resulting from accidents and injuries that may arise.</p>			
I give permission for the PGC staff or Athletic Trainer to administer prescription or over-the-counter medication if needed.		Parent/Guardian Signature: <i>(Athlete Signature if over 18)</i>	
_____ (Signature, if desired)		Date:	

BE SURE TO BRING THIS SHEET WITH YOU TO YOUR SESSION