

## *Coach Kevin Nickelberry's Bio*

- Over 20 years of Coaching Experience on the College and Professional Level
- Rated #15 on the "Top 25 Up-and-Coming" head coaches in Division I Basketball by HoopScoopOnline.com & *The Sporting News*
- Top 25 recruiter in the country
- Has been a part of four teams in the NCAA Tournament
- Coached professionally in Turkey, Morocco, & Libya



## *Camp Information*

- Camp Dates: August 3rd-6<sup>th</sup> 2015
- Hours: Monday 8:00AM- 4:00PM  
Monday-Thursday 9:00AM-4:00PM
- Open to any and all entrants for youth between the ages 6-18 who have not completed or started their senior year of high school
- Before & After Care are available!
- Campers are supervised at all times. Camp Director reserves the right to dismiss any camper for misconduct with no refund
- The camp has a medical trainer on duty at all times
- Every Camper receives an official Kevin Nickelberry Camp T-Shirt & Evaluation Card

## *Camp Application Form*

Name:

Mailing Address:

City, State, Zip:

Phone #:

E-mail:

School:

Age & Grade Level (Upcoming Yr.):

**CAMP FEE: \$150.00**

- Multiple campers discount
- **NO Refund** will be granted after June 30
- Lunch Optional

Howard University Employee  
Rate \$125.00 each camper

*PLEASE SEND REGISTRATION TO:*  
Howard University Men's Basketball  
Kevin Nickelberry Basketball Camp  
6<sup>th</sup> & Girard Streets, NW  
Washington, DC 20059

Or

Sign up at [www.coachnickelberry.com](http://www.coachnickelberry.com)  
If you have any questions please call

**(202) 806-9096**

## *Insurance Information*

Camper Social Security#:

Parent's Name:

Daytime Phone#:

Attach a Copy of Insurance Card OR Complete this Section.

Name on Insurance Card:

Name of Insurance Company:

Policy Number:

Medicaid / Medicare Policy #:

List all medications camper is currently taking:

List all medical conditions currently under treatment:

Is Camper allergic to any medications?  
YES / NO

If YES please specify \_\_\_\_\_



*Hold Harmless Agreement  
(Required for participation)*

I agree to hold harmless Kevin Nickelberry, Howard University, and all their employees, officers, and agents in the event of an injury occurring to my child during the period from August 4th - 7th on the campus of Howard University. I understand that my child will be participating in a program of physical activity, skills training, contact games, instruction, and evaluation in the sport of basketball. I recognize that participating in these activities has a certain amount of risk and that injuries are always possible. Injuries may include, but are not limited to, cuts, fractures, sprains, and abrasions. I certify that my child is physically able to participate in the above sports/activities. I promise to provide the Kevin Nickelberry Basketball Camp with any other relevant medical information about my child. I assume full financial responsibility for medical expenses arising out of such injury in excess of any insurance provided by the camp. I hereby authorize the camp director to act for me according to his best judgment in any emergency.

Parent/Guardian (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*Mandatory*

All campers are required to obtain a complete sports physical from a licensed physician before attending the Kevin Nickelberry Basketball Camp/Howard University Men's Basketball. Signature below authorizes a child to participate in all camp activities.

Parent/Guardian (please print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Kevin Nickelberry Youth Basketball Camp  
Howard University  
6<sup>th</sup> & Girard Streets, NW  
Washington, DC 20059

*Kevin Nickelberry  
Youth  
Basketball Camps*

**August 3rd - 6th 2015**



**SPACE IS LIMITED!!!!**

**202-806-9096**

*For Youth Ages 6-18*

