



PCMS Boys 2025

Summer Basketball Camp

Grades 7 & 8 – May 27–May 30, 11:30 am–1:30 pm

Camp Instruction

Come enjoy a week of instruction from the PCMS basketball coaching staff, stressing the fundamentals of shooting, passing, dribbling, defense, and the overall TEAM game of basketball.

The campers will learn drills which develop fundamental skills to take home and practice throughout the year.

Location

Pittsburg Community Middle School New Gym

Age Requirements

Any boy who will be in grades 7 or 8 at PCMS during the 2025-2026 school year.

Cost of Camp

An enrollment fee of \$25 per student will be charged. Families with more than one student participating in the PCMS Basketball Camp will be charged \$20 per student. Each camper will receive a camp shirt.

Please make checks payable to:
PCMS Basketball

Registration

You may turn in your completed application form and payment to Coach Cameron as soon as possible or you may choose to bring your completed application form and payment to the gym the morning of the first day of camp and register 30 minutes prior to your student's session.

Be aware that if you send a check ahead of time, it may take 2-3 weeks to be cashed.

Mailing Addresses

Pittsburg Community Middle School
ATTN: James Cameron
1310 N. Broadway
Pittsburg, Kansas 66762

For More Information Please Contact

Coach Cameron at PCMS 620-235-3240,
jcameron@usd250.org or via Remind: Text @97ckk to 81010 or enter the class code directly into the Remind App

Date/Time

Tuesday, May 27 – Friday, May 30
11:30 am – 1:30 pm
Incoming grades 7 & 8

*Please cut on dotted line and return bottom portion with payment. **Please keep top portion for you records***

Application Form

Student's Name: _____ Age: _____ Grade in Fall "25": _____

Parent/Guardian Name: _____

Address: _____ Telephone - Home/Cell: _____

Work Phone: _____

T-Shirt Size: Circle Appropriate Size

ADULT: S M L XL 2XL

YOUTH: YS YM YL

Parent's Release and Indemnity Agreement to: "Pittsburg Community Middle School Basketball Camp"

I hereby grant permission for my child, _____ to participate in the Pittsburg Middle School Boys Basketball Camp. My child has not suffered any illnesses in the past that would make participation in the camp a risk. I further agree to release from any liability, the Basketball Camp, its staff, Pittsburg Community Middle School and Unified School District #250 for any injury or illness suffered by my child while attending or traveling to or from this camp. I further authorize the staff or the Basketball Camp to act for me in case of any medical emergency because of injury or illness to my child. I acknowledge that I am aware that participation in this camp will require physical activities of a nature which could result in injury to participants notwithstanding the absence of fault on the part of the camp, its staff, Pittsburg Community Middle School and Unified School District #250. The camp staff has explained to me the particular activities to my satisfaction and I am hereby authorizing my child to participate in these activities.

List any health conditions or concerns

Parent/Guardian Signature

Date