



BLOOMFIELD BENGALS BASKETBALL CAMP

DREAM IT. BELIEVE IT. ACHIEVE IT.

WHO: BOYS & GIRLS ENTERING GRADES 3-9 IN SEPTEMBER

CAMP DIRECTOR

Michael Passero, Head Boys
Basketball Coach at Bloomfield H.S

Bloomfield Bengals Basketball Camp has been designed as a co-ed camp that will teach all basketball fundamentals, and includes game & tournament competition. Teaching and instructing, while building confidence in our campers, is our top priority!

CAMP SCHEDULE

9:00 Check-In / Shoot
9:15 Ball Handling
9:40 Skill Stations
10:40 Morning Break (snack bar)
10:55 Competitions
11:30 Games
12:30 Contests
12:55 Announcements / Dismissal

WHAT TO BRING

Sneakers, Medications, Drinks, Mask

2 GREAT WEEKS!

WEEK 1: June 28th - July 1st

WEEK 2: July 5th - July 8th

9:00 AM to 1:00 PM

LOCATION

Bloomfield High School
160 Broad Street, Bloomfield, NJ

CAMP TUITION:

\$150. PER WEEK

\$25. Sibling Discount

\$15. Late / Walk up Fee

MAKE CHECKS PAYABLE AND MAIL TO:

BLOOMFIELD BASKETBALL
52 KENWOOD AVE VERONA, NJ
07044

Or Venmo: @Michael-Passero

Space is limited, so act quickly!!!

CAMP HIGHLIGHTS

- ☐ Highly Qualified Staff
- ☐ Covers All Phases of The Game
- ☐ State of The Art Facility
- ☐ 3 Air Conditioned Gyms
- ☐ Shooting Machine
- ☐ Games & Competitions
- ☐ Skill Test & Contests
- ☐ Awards & Prizes
- ☐ Camp T-Shirt
- ☐ All Covid19 Guidelines Enforced
- ☐ Snack Stand with Candy, Gatorade And Water

FOR MORE INFORMATION

- ☐ mpassero@bloomfield.k12.nj.us
- ☐ Phone: 973.809.6058
- ☐ Twitter: @bengal_hoops

[CLICK HERE TO REGISTER ONLINE](#)

BLOOMFIELD BENGALS BASKETBALL CAMP REGISTRATION APPLICATION

Camper Name: _____

Grade (Fall 2021): _____

Week1. ____ Week 2. ____ Both. ____ (Please Check One) Amount Enclosed: \$ _____ Or Venmo _____

T-Shirt Size: YS ____ YM ____ YL ____ S ____ M ____ L ____ XL ____ (Please Check One)

Parent / Guardian: _____ Email: _____

Address: _____ Town: _____ Phone #: _____

Emergency Contact (Other than parent / guardian) Name: _____ Phone #: _____

Allergies/ Medical Conditions: _____

I hereby/ authorize the agents of Bloomfield Bengals Basketball Camp to act for me according to his/her best judgement in any emergency requiring medical attention. I hereby release and discharge the Bloomfield Public Schools, camp staff, affiliated entities and their officers, agents, employees from and against any and all liability or causes of actions arising out of or in connection with my or my child's participation in the camp.

Parent/Guardian Signature: _____ Date: _____