

Camp FAQs

- Individual Instruction
- Daily Game Competition
- Written Evaluations
- Free camp t-shirt

About the Directors

Coach Ed Gagnon:

A veteran teacher of 40 years, Coach Gagnon has been a faculty member at Bishop Feehan since 1974. He has 23 years of high school head coaching and 17 years of college coaching experience, along with running basketball camps for over 30 years.

Coach Leo Charron:

Coach Charron previously taught at Bishop Feehan for 25 years and has been a head coach there for 23 years in five varsity sports including 13 years as head basketball coach. In addition, he has over 20 years of basketball camp experience at various age and skill levels.

Reminders

What to bring to camp?

- Water bottle
- Bagged Lunch
- Sunblock (for outdoor sessions)

What to wear?

- Basketball sneakers
- White socks
- Shorts appropriate for basketball

20th Annual 2008 **Summer Basketball School** **at** **Bishop Feehan**

Three great weeks ***New Starting Times***

Girls entering grades 5-9 July 14-18
8:30 am to 2:30 pm \$200

Boys entering grades 5-9 July 21-25
8:30 am to 2:30 pm \$200

Boys and Girls grades 1-4 July 28-Aug. 1
8:30 am to 12:00 pm \$140

Make checks payable to
“Summer Basketball School”
70 Holcott Drive
Attleboro, MA 02703

Your check is your assurance of registration
Walk-in registration subject to \$10 late fee
*** 10% family discounts available**

Questions? Call or Email us!
Coach Ed Gagnon
508-226-0975
egagnon@bishopfeehan.com
Coach Leo Charron
508-226-1084

*An updated physician's report on
immunizations must be presented for each
camper by the first session.*

Summer Basketball School 2008

Mail to: 70 Holcott Drive Attleboro, MA 02703

Week of: _____ Entering grade as of Sept. 2008 _____
Name: _____ City: _____ Zip: _____
Street: _____ Amt. Enclosed: \$ _____ (Payable to Summer Basketball School)
Telephone: _____

The program directors and staff are not responsible for accidents resulting in medical, dental, or other expenses. Participants are responsible for property damage and may be sent home without refund for violation of school rules. I certify that the applicant is in good physical condition to take part in the program. In addition, I grant Bishop Feehan High School and its agents, permission to seek medical attention for this child if, in their judgment, such attention is warranted and I am not immediately available to grant such permission.

Parent Signature: _____ Date: _____
Medical Insurance Company: _____ #:

Camper's Level of Play (Check One) __ Beginner __ Intermediate __ Advanced