

MANSFIELD HIGH SCHOOL GIRLS BASKETBALL
DIVISION 1 SOUTH SECTIONAL CHAMPIONS-2010
HOCKOMOCK LEAGUE CHAMPIONS-2011, 2016, 2017

FOR GRADES 6, 7, 8, 9 (FALL OF '18)

HORNET HOOP CLINIC SUMMER 2018

WHERE: MASS PREMIER COURTS, MANSFIELD/FOXBORO LINE, ROUTE 106

WHEN: **MONDAY, JUNE 25th TO THURSDAY, JUNE 28TH** 8:45 AM-3:00 PM

WHO: GIRLS ENTERING **GRADES 6, 7, 8, 9** IN THE FALL OF 2018

STAFF: DIRECTOR, MIKE REDDING, HEAD COACH, GIRLS' BASKETBALL, MANSFIELD HS
 ASST. DIRECTOR, HEATHER MCPHERSON, HEAD JV COACH-GIRLS' BASKETBALL
 FORMER MHS CAPTAINS AND ALUMNI NOW PLAYING ON THE COLLEGE LEVEL
 CURRENT VARSITY PLAYERS ON THE 2017-2018 MANSFIELD HS BASKETBALL TEAM

CAMP FEE: FEE OF \$160.00 PER PERSON INCLUDES FOUR FULL DAYS OF INSTRUCTION AND AN
 OFFICIAL MHS CAMP T-SHIRT IF REGISTERED BY JUNE 1ST. PLAYERS CAN BRING
 THEIR OWN LUNCH OR BUY DRINKS/FOOD ITEMS AT MP CONCESSION STAND.
 PLEASE AVOID BRINGING SNACKS/FOOD THAT CONTAIN ANY PEANUTS!
 THERE WILL BE DAILY COMPETITIONS FOR AWARDS/PRIZES, ALSO.
(FAMILY RATE FOR TWO OR MORE AT FULL-DAY CAMP IS \$260.00)

TYPICAL DAILY SCHEDULE OF DRILLS/GAMES/EVENTS FOR "HOOP CAMP" 2018

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| 8:45 AM | FREE SHOOTING AND FOUL SHOTS |
| 9:00 AM | STRETCHING, AGILITY AND REACTION DRILLS |
| 9:15 AM | OFFENSIVE DRILLS AND FUNDAMENTAL SKILL DEVELOPMENT PASSING, SHOOTING, DRIBBLING, REBOUNDING, SETTING SCREENS |
| 10:15 AM | DEFENSIVE DRILLS, SKILL DEVELOPMENT AND TEAM DEFENSE STANCE, POSITION, SLIDE, REBOUNDING, MAN-TO-MAN, ZONE |
| 10:45 AM | STAFF LECTURE ON BASKETBALL TECHNIQUE WITH DEMONSTRATION |
| 11:00 AM | PLAYOFF GAMES FOR WNBA (8-9) AND COLLEGE (7-8) DIVISIONS |
| 12:00 PM | LUNCH BREAK (DRINKS, FOOD, SNACKS AVAILABLE AND FREE SHOOTING) |
| 1:00 PM | PROGRESSION OF ADVANCED OFFENSIVE SKILLS FROM MORNING |
| 1:30 PM | PROGRESSION OF ADVANCED DEFENSIVE SKILLS FROM MORNING |
| 2:20 PM | PLAYOFF GAMES FOR WNBA (8-9) AND COLLEGE DIVISIONS (7-8) |
| 2:55 PM | CAMP MEETING AND CONTEST AWARD PRESENTATIONS |

**** PLEASE SEE OTHER SIDE FOR REGISTRATION FORM AND MAILING INFORMATION ****

DIV. 1 STATE TOURNEY: 2001, 2002, 2004, 2005, 2006, 2007, 2009, 2010, 2011, 2012, 2014, 2015, 2016, 2017

DIVISION 1 SOUTH SECTIONAL CHAMPIONS-2010

DIVISION 2 SOUTH SECTIONAL FINALISTS-2007

DIVISION 1 SOUTH SECTIONAL FINALISTS-2011, 2017

HOCKOMOCK LEAGUE CHAMPIONS-2011, 2016, 2017

GOALS OF THE CAMP: PLAYERS WILL BE INSTRUCTED IN THE FUNDAMENTALS OF THE GAME OF BASKETBALL WITH OFFENSIVE DRILLS FOCUSING ON SHOOTING, DRIBBLING AND PASSING. DEFENSIVE DRILLS WILL INCLUDE EMPHASIS ON BOTH MAN-TO-MAN TECHNIQUES AND ZONE RESPONSIBILITY AS WELL AS REBOUNDING TECHNIQUES. THE CAMP IS ALSO DESIGNED TO IMPROVE THE PLAYER'S CONDITIONING, FLEXIBILITY AND TEAMWORK SKILLS. THERE WILL BE TEAM AND INDIVIDUAL COMPETITIONS TO EVALUATE AND IMPROVE SKILLS. ALL AWARDS WILL BE EARNED ON AN INDIVIDUAL BASIS THROUGH COMPETITIONS. THERE WILL BE NO TEAM AWARDS FOR PLAYOFF COMPETITIONS. THESE GAMES ARE TO ENHANCE INDIVIDUAL SKILLS AND PROMOTE TEAMWORK. ALL PLAYERS WILL PLAY THE SAME NUMBER OF GAMES AND AN EQUAL AMOUNT OF PLAYING TIME. WE WANT THE PLAYERS TO LEAVE THE CAMP WITH A STRONG INTEREST IN CONTINUING THEIR BASKETBALL CAREERS ON THE HIGH SCHOOL LEVEL AND WITH A GOOD UNDERSTANDING OF THE GAME.

ADDITIONAL QUESTIONS OR COMMENTS ???

PLEASE CALL MIKE REDDING AT MHS 508-243-0986
OR E-MAIL AT: michael.redding@mansfieldschools.com

PLEASE CLIP BELOW AND MAIL TO:

GIRLS' YOUTH BASKETBALL CAMP
C/O MICHAEL REDDING
MANSFIELD HIGH SCHOOL
250 EAST STREET
MANSFIELD, MA 02048

CHECK PAYABLE TO: MICHAEL D. REDDING

2018 MANSFIELD HIGH SCHOOL HOOP CAMP FOR GIRLS' BASKETBALL----REGISTRATION FORM

NAME _____ AGE _____ GRADE-FALL OF 2018 _____

ADDRESS _____ CELL PHONE _____

E-Mail Address _____

T-SHIRT SIZE (PLEASE CIRCLE ONE) Y-LG Y-XL S M LG XL (ADULT UNISEX SIZES)

EMERGENCY NAME AND PHONE (8:45 AM-3:00 PM) _____

HEALTH INSURANCE PROVIDER _____

**The above named has my permission to participate in Mansfield HS Basketball Camp. I understand and accept the condition that Mansfield High School, the Camp Directors or any member of the staff will not be liable for accidents and medical or dental expenses that are incurred as a result of participation in this program. I further release the Mansfield Public Schools against any and all claims.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____

**** NEW REQUIREMENT---PLEASE INCLUDE A COPY OF YOUR DAUGHTER'S MEDICAL HEALTH RECORD WITH YOUR REGISTRATION THAT INCLUDES ANY MEDICAL CONDITIONS OR ALLERGIES. THANK YOU**

PLEASE MAKE CHECK PAYABLE TO: MICHAEL D. REDDING (IND. RATE \$160.00/FAMILY RATE \$260.00)
WE LOOK FORWARD TO SEEING YOU ON MONDAY, JUNE 25TH AT 8:45 A.M. AT MASS PREMIER. YOUR CANCELLED CHECK WILL SERVE AS YOUR RECEIPT OF PAYMENT. REMEMBER TO REGISTER BEFORE JUNE 1ST TO GUARANTEE YOUR DAUGHTER HER EXACT T-SHIRT SIZE. IF YOU PROVIDE AN E-MAIL ADDRESS, YOU WILL RECEIVE CONFIRMATION OF REGISTRATION.