

ORLANDO CHRISTIAN PREP SUMMER BASKETBALL CAMP



Improve your basketball skills in
our basketball camp program.

June
9-12
16-19

A.D. Norman
Life Center
at OCP

\$100 Per Session

\$175 BOTH Sessions

9AM-NOON

Open 8am to 1pm

ALL Campers Receive:

- Camp T-shirt
- Can Purchase Drinks/Snacks from
Warrior Cafe

Parents can provide a bank on the first day for drinks and snacks for the week.

OPEN TO

BOYS & GIRLS

Elementary & Middle
School Students

Entering Grades 1-7



**AFTER CARE
SPECIAL RATE**

Students can stay on campus w/
special rate; **6 pm pick up or charged**
\$5 per minute (Camp Weeks ONLY)

**\$10/
Day**

Questions? Coach Treig Burke
(Phone) 407-823-9744

(Email) athletics@orlandochristianprep.org

Payments:

Cash, Card or Money Order (Payable to Orlando Christian Prep Basketball). **No Checks Accepted.** Payments accepted via mail or in-person at the school office.

OCP students CANNOT be billed via RenWeb.

ORLANDO CHRISTIAN PREP SUMMER BASKETBALL CAMP



Registration Form 2025

CASH _____ *MONEY ORDER/CASHIER'S CHECK _____ **DEBIT/CREDIT _____

*Payable to Orlando Christian Prep Basketball **Payable at school office

Camper's Name _____ Age/Grade _____

Address _____

City _____ Zip _____

Parent Name #1 _____ Cell _____

Email _____

Parent Name #2 _____ Cell _____

Email _____

T-SHIRT: (circle) XS (youth large) Adult: S M L XL XXL

Please check which week camper will be attending:

Week 1 (June 9-12) _____ Week 2 (June 16-19) _____ Both _____

Will camper attend OCP After Care following camp: Yes _____ No _____

I hereby release the directors of the Orlando Christian Prep Basketball Camp to act for me according to their best judgment in anyone requiring medical attention. I hereby waive and release the directors of the Orlando Christian Basketball Camp, Orlando Christian Prep and Orlando Baptist Church from all liability and agree to accept all medical expenses incurred. I know of no physical or mental problem which will affect my child's ability to safely participate in this camp. Injuries incurred while at camp may result in a prorated refund. I acknowledge and accept the conditions above with my signature below.

Parent/Guardian Signature _____ Date _____