



Washington State Basketball Skills Training Advantage Basketball Camps

OUR MISSION

Our mission is to provide a clean, safe, positive environment for our youth to learn and grow in. Our emphasis is divided between helping individuals develop physical skills and promoting lifelong skills such as self-esteem, Christian moral values, and sportsmanship.

OUR HISTORY

Our director Michael Hummel started teaching Ball Handling techniques at his camps in 1987 in the greater Seattle area. Our camps have grown to include A.B.L., W.N.B.A. and U of W players. We have many graduated and current college players who love to come and share how these skills elevated their game. For many years we have had to turn kids away from every camp including long time campers so now we are offering several camps.

CAMP DIRECTOR

Michael Hummel is the President of AAU Washington Girls Basketball and served as AAU chairman for the Pacific Northwest. Michael has coached and taught basketball for the last 18 years at the High School, College, and National Level.

CAMP INSTRUCTORS

Will include our top counselors, Michael Hummel (see above), and a team of talented basketball players and coaches.

SMALL GROUP INSTRUCTION

In small groups, instructors can give students more individual attention than one of our regular basketball training camps. The instructors work on several different areas of the player's game, depending on what the individual athlete's current needs are. With the additional attention of small group training, you will accelerate your learning, getting better faster.

As always, fundamentals are our focus. If you want to fully develop your game and are willing to work hard, and we do mean hard, then this is for you. Our instructors are highly-skilled basketball players and basketball coaches. They will push you as a player and help you take your game to the next level.

Team Discounts

If you have an entire basketball team, you can hire one of our trainers to coach your whole team. This can be arranged through our office and will follow the same guidelines as the Group Discounts. Send an e-mail to info@advantagebasketball.com or call 425-670-8877 for details.

Location: Old Edmonds Woodway High School
23200 - 100th Avenue W, Edmonds, WA 98020
Time: Fridays 7:00 pm to 9:00 pm

Advantage Basketball Academy
14445 NE Juanita Dr Kenmore WA 98028
Time: Monday through Sunday 6:00 am to 11:00 pm

PRIVATE ONE-ON-ONE TRAINING

To get the ultimate in personal attention, select private one-on-one instruction between the trainer and the athlete. The trainer will work directly and only with one student for the entire training session. In every case the following will apply: Cost is \$100.00 per hour. Sessions are one hour long.

In all cases, the parent or guardian of the athlete must be in the gym with the trainer at all times. (No exceptions.)

Sessions are one hour in length. Our trainers can travel to your location, but travel time/charges may apply. Other session times and frequencies can be arranged. Call for details.

TRAINING CONDUCTED AT YOUR LOCATION

We can come to your gym for training and all of the above rules will apply. Call the Advantage Basketball Camps office at 425-670-8877 and we will work out details on a case-by-case basis.

Please complete all questions before submitting your registration. Please PRINT legibly.

1. GENERAL INFORMATION

STUDENT NAME (Last, First, and Middle Initial)		GENDER <input type="checkbox"/> F <input type="checkbox"/> M	DATE OF BIRTH	GRADE
PARENT / GUARDIAN NAME (Last, First, and Middle Initial)			HOME TELEPHONE	
MAILING ADDRESS (Include apartment number, if any)			WORK (or message) TELEPHONE	
CITY	STATE	ZIP	PARENT E-MAIL ADDRESS	

2. SELECT A PROGRAM, LOCATION AND STARTING DATE

Call our corporate office to schedule a location time and trainer at 425-670-8877 or email us at info@advantagebasketball.com			
<input type="checkbox"/> Private One-on-One Training (\$100.00/hr)			
Starting Month (Jan-Dec):	Number of sessions:	Starting Month (Jan-Dec):	Number of sessions:

3. PAYMENT INFORMATION

PAYMENT METHOD <input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> DISCOVER <input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER		NAME ON CREDIT CARD	
CREDIT CARD NUMBER		VALIDATION NUMBER*	EXPIRATION MO/YEAR /
BILLING ADDRESS (If different from registration address above)			
CITY	STATE	ZIP	

* Credit card validation number is the rightmost three digits on back of Visa and MasterCard cards. You may add or reduce sessions later. Your credit card will be charged now only for the initial session. It will be charged at the beginning of each month only for that month's scheduled session.

CARDHOLDER

DATE

/ /

SIGNATURE

4. DATE AND SIGNATURE

I understand that participation in Advantage Basketball involves risk and dangers of serious and permanent bodily injury and death. I hereby release, hold harmless, discharge, and agree not to sue Advantage Basketball, Hummel Enterprises Inc., Michael Hummel, Advantage Basketball Camps, Washington Girls Select Basketball, all their affiliates and DBA's, all directors, officers, employees, coaches, officials, volunteers, agents, sponsors, advertisers, owners/leasers of premises for and from all liability from my participation in and with these and any other related travel, lodging, social and recreational activities.

I have given my daughter/son permission to participate in the Advantage Basketball events, and I certify that she/he is in good health, has been cleared by a physician and can take part in all physical activities not limited to but including training, practices, and games. I am aware of all laws, rules, and safety procedures regarding head concussions. If an injury or emergency occurs, I authorize the staff members and/or personnel to take any action and use the emergency service available at the nearest hospital if necessary. I understand my personal insurance will be used in this case. I have read and understand and agree with all the parent, players, and team packets and will follow all rules and code of conduct.

I understand I will be charged monthly for training until I cancel future sessions with at least a 10-day written notice. I understand that if I do not give a 10-day written notice that I will be billed for the following month. Cancellations from the 1st of the month to the 10th day prior to the end of the month will apply to the following month. (Example: if you want to cancel your membership for April you must give us written notice by March 21st. If you send us written notice on March 21 or April 3rd telling us you want to cancel April, that cancellation will apply to May.) All cancellations must be in writing. I further understand that there is no refund for any missed sessions regardless of the reason. If a session is cancelled by Advantage Basketball due to inclement weather, a gym closing, or any other reason, a refund or credit will not be issued. All fees are final and non-refundable.

I also understand Advantage Basketball, Hummel Enterprises Inc. and Washington Girls Select Basketball and their dba's retain the right to use for publicity and advertising, photographs and video taken of the participants.

PARENT / GUARDIAN

DATE

/ /

SIGNATURE

5. SEND FORM AND PAYMENT TO ADVANTAGE BASKETBALL CAMPS

Please submit this completed application with check or money order, if applicable, to:

Advantage Basketball Camps
P.O. Box 1344, Lynnwood, WA 98046 Phone: 425-670-8877 Fax: 425-670-8877 (same as tel)
 For further information, please see our website at: www.advantagebasketball.com
 or send e-mail to: info@advantagebasketball.com