



South Atlantic
Champions

2000-01

2002-03

2003-04

NCAA II Regionals

2000-01

2002-03

2003-04

2011-12

2013-14

Terrence Baxter
WBB Head Coach
Catawba College
Camp Director

22 years of Camp Experience!

CAT-U GIRLS
BASKETBALL CAMPS
CATAWBA COLLEGE
2300 W. INNES ST
SALISBURY, NC 28144

CATAWBA COLLEGE

WOMEN'S BASKETBALL



JULY 15-18

AGES 7-14

Cost

Day: \$150

Resident: \$250

For more information go online to gocatawbaindians.com and click on the camps link, or call Terrence Baxter at 704-637-4226 or email: TLBaxter13@catawba.edu

The purpose of the Fundamental Camp is to provide girls with top quality instruction to enhance their skill development in all areas of the game.

FUNDAMENTAL SKILLS

- Offensive and Defensive Footwork
- Body Balance
- Shooting: form (mechanics)
- Jumps shots, 3 pointers,
- Off the dribble, free throws
- Passing
- Ball handling (stationary, full court)
- Rebounding
- On ball defense
- Progressive teaching development:
 - One on one
 - Two on two
 - Three on three
- Movement without the ball

Sample Daily Camp Schedule

- 9-11 Skill Work
- 11-12 Contests (swimming optional)
- 12-1 Lunch
- 1-1:30 Contests
- 1:30 –3 Skill work
- 3-4 Competitive Games
- 4 Day camp ends
- 5-6 Dinner for resident campers
- 7-9 skill work/competitive games for resident campers

ARRIVAL/DEPARTURE:

Day and Resident campers will register between 8:00-8:45 am on Monday July 9th at Goodman Gym Lobby. The first session will start at 9:00 pm. Camp will end at 12 pm on Thursday. Resident campers need to bring:

- *Pillow and sheets for single bed*
- *Shower items, towels, etc.*



Please complete and return with payment:

Cat-U Girls Basketball Camp
Terrence Baxter
2300 W. Innes St.
Salisbury, NC 28144

Name _____
Address _____

Phone _____
Age ____ School _____
Grade ____ Position _____
Adult T-Shirt size (circle) S M L XL

Make checks payable to:

Terrence Baxter, camp director
50.00 deposit due by June 30th
NO PERSONAL CHECKS!!!
School Checks, Money Order or CASH

Fundamental Camp (July 9-12)
\$250 Resident ____ \$150 Day ____

Insurance—Each camp participant will be covered by secondary insurance while attending the camp. The insurance provides coverage secondary to the individual's family policy. If secondary insurance is used, the participant is responsible for the amount of the deductible.

Policy Holder's Name _____
Insurance Company's Name and Address _____

Policy No. _____
Emergency Contact Person _____
Phone number _____

The parent, by signing this enrollment form, hereby releases the camp and its instructors from liability for accident, injury, sickness, etc., which may occur.

Parent signature

Call Terrence Baxter 704-637-4226