

OFFSEASON BASKETBALL TRAINING with Dennis Stanton



“THE PROGRAM” **8 WEEKS 8 WORKOUTS** **Great Way to Maximize Your Offseason!**

Ages: Boys and Girls 7 -17 (SPACE IS LIMITED!!)

Place: Dock Mennonite Academy

1000 Forty Foot Road

Lansdale, PA

Format: 8 ONE HOUR LONG WORKOUTS on SUNDAYS (2-3pm)

“The Program”- Elite level basketball curriculum that will enhance player’s skills and elevate their game. Workouts will be geared towards individual skill improvement in the venues of shooting, dribbling, breakdown moves, passing, defense and speed/agility/strength. Features:

- Individualized instruction
- Homework after each week
- Game speed training and simulation for skill implementation
- Film breakdown of each individual’s shot during workout (9-workout participants)

Cost: 3 options

- REGISTER FOR ALL 8- \$280.00 (\$35 per workout)
- REGISTER for 5- \$200.00 (\$40 per workout) - WALK UP- \$45.00

REGISTRATION ON NEXT PAGE

PLEASE CHECK THE DATES THAT YOU WILL BE COMING:

SUN April 7 2-3pm

SUN April 14 2-3pm

SUN April 21 2-3pm

SUN April 28 2-3pm

SUN May 5 2-3pm

SUN May 12 2-3pm

SUN May 19 2-3pm

SUN June 2 2-3pm

Questions/Concerns Please Call: 215-284-7134 or email
dennis@everylevelbasketball.com
www.EveryLevelBasketball.com

Make Check Payable to: Dennis Stanton and mail to 450 Holly Rd, Blue Bell PA 19422

Name: _____ Age: _____

Parent Cell: _____

I enclose \$ _____

Email: _____

I hereby authorize the owner and director of EVERY LEVEL BASKETBALL CAMP LLC, Dennis Stanton to act for me, to his best judgment, in the event of an emergency requiring medical attention. I hereby consent to voluntarily engage in this program for my child. I have been informed, consent to and understand that there is a risk of injury during exercise and sport-training. I have been given the opportunity to ask questions regarding this program. I do hereby waive, release and discharge Dennis Stanton, EVERY LEVEL BASKETBALL CAMP LLC, Dock Mennonite Academy, from any and all claims or liability for injuries or damages arising out of participation in this program, excluding those caused by intentional negligence or omission.

Parent Signature: _____

Date: _____