



**Alpharetta Players Camp**  
**Session 1: June 19 – June 22nd, 2017**  
**Session 2: July 17 – July 20, 2017**  
**9:00am – 3:00pm**

Coach Dasinger and his staff are looking forward to hosting TWO camps this summer! After his first year at Alpharetta, Coach Dasinger led his program to a **25-4 record, the regular season region championship, and was named Region 7 6A Coach of the Year.** In addition to tying the school record for wins, the boys also won the North Forsyth Thanksgiving Tournament and the prestigious Deep South Classic. Coach Dasinger is looking forward to bringing fun and fundamentals to the second year of the Players Camp.

**\*\*ALL CAMPERS WILL RECEIVE A  
 CAMP T-SHIRT, DRAWSTRING BAG, AND EVALUATION FORM\*\***

**\*\*Campers should bring their own LUNCH. There will be a concession stand open  
 with pizza, drinks, and snacks for purchasing if desired.**

**\*\*Campers will be able to win daily and weekly prizes!!\*\***

**For more information contact:  
 Jason Dasinger, Alpharetta HS Head Boys Basketball Coach - (404) 218-8593**

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (Fall of 2017) \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Mom's Email \_\_\_\_\_ Dad's Email \_\_\_\_\_

Circle Camper's T-Shirt Size (ADULT Sizes)    S    M    L    XL

Which session(s) you will attend:

\_\_\_SESSION 1 – June 19-22 **\*\* If you attend two sessions, you get a \$15 discount on the 2<sup>nd</sup> session.**

\_\_\_SESSION 2 – July 17-20

**\*\* If you attended last year you get a \$10 discount on one session based on the unfulfilled basketball orders.\*\***

**Camp Cost:**    \$175 if received 4 days before camp begins  
                      \$190 if received after due date

**Checks Payable to: Alpharetta Boys Basketball**  
**Mail to:**            Alpharetta High School  
                               Attn: Coach Jason Dasinger  
                               3595 Webb Bridge Road  
                               Alpharetta, GA 30005

I give consent for my child to attend the AHS Players Camp. It is understood that the camp does not provide insurance and I will be responsible for my child's insurance coverage. I certify that my son is physically fit to participate in basketball camp. The coaches and staff will not be held liable for any accident, injury, or any illness that may occur while participating in camp activity.

Parent Guardian Name: (Print): \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_