CAMP INFORMATION

Date: June 26-29 (ages 8-14)

Day Camps:
- Emphasize skill improvement
- Shooting technique
- Footwork
- Ball-handling
- Offensive/defensive skill development
- Team competition and individual contests
- Camps will be separated by age and skill level.
- Camp Hours: 9 a.m.-3 p.m.

CONTACT US TODAY!

WESTMINSTER COLLEGE

Titan Basketball Camp
319 S. Market Street
New Wilmington, PA 16172

STAY CONNECTED
CALL: 724-946-7309
VISIT: westminster.edu/athletics
EMAIL: scottrm@westminster.edu or sirokikg@westminster.edu

JOIN THE CONVERSATION

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CLINIC REGISTRATION FORM

PLEASE PRINT

Name ________________________________
Grade (Fall '17) __________ Age __________ M F
School __________________________________
Home Phone ___________________________
Email Address _________________________
Home Address ___________________________________________
City __________________ State ________ Zip __________

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In case of emergency during the clinic, please give the name and phone number of someone we can contact:
Name ________________________________
Telephone ___________________________

I give my consent and approval to the participation of my daughter/son in the Titan Basketball Camp. I certify that s/he is physically fit to take part in all camp activities. I give my consent for medical treatment in the event of injury or illness and I cannot be reached at the telephone number listed. I relieve the clinic of any responsibility should any accidents occur.

I relieve Westminster College and the Titan Basketball Clinic for stolen and lost valuables.

__________________________________________
T-shirt size (circle one):
Youth:  M   L
Adult:  S   M   L   XL

X ________________________________________

Signatures on this registration form signify each parent/guardian has read, understands and abides by this information. I release and discharge Westminster College, and workers and employees, from all actions, suits, and demands whatsoever in law or in equity, including, but not limited to, the risk of injury from participating in camp and the risk of loss of personal property by theft or otherwise. I give permission to workers and employees to treat injuries sustained in camp.

Parent/Guardian Name ____________________________
Parent/Guardian Signature ____________________________
Insurance Carrier ________________________________
Policy Number ________________________________

CAMP DIRECTORS
ROSANNE SCOTT is in her 15th year as head coach of the Westminster women’s basketball team for the 2016-17 season. Scott guided Westminster to a pair of 20-win seasons and berths in the NCAA Division III Tournament in 2005 and 2007. The 2005 team won the program’s first and only Presidents’ Athletic Conference (PAC) Championships and advanced to the second round of the national tournament, while the 2007 team set a new school record for wins with a 22-7 record before qualifying for the NCAA playoffs. Scott is a two-time PAC Coach of the Year. The Titans played in the PAC championship game in five out of seven years from 2004-10.

KEVIN SIROKI is in his fifth season as the head coach of the Titan men’s basketball team for the 2016-17 season. Siroki has coached six All-PAC honorees and nine PAC Academic Honor Roll recipients. Siroki also coached Doug Smith ’13, Anthony Thomas ’14, and Paul Carswell ’16, who all finished their careers with over 1,000 points. Siroki previously was the athletic director and the head men’s basketball coach at Galen University in Belize, Central America. Siroki earned multiple championships and awards in professional international basketball, as a player and as a coach.