



May 27-30

Session I

May 27-30 ~ 9-11:30 am
For boys entering Grades K-4

Session II

May 27-30 ~ 12:30 – 3 pm
For boys entering Grades 5-8

LOCATION:

Mountain View HS

Cost \$80

Each participant will receive:

- 1 hour of instruction and drill each day.
- Daily scrimmage
- Skills to work on
- Philosophy of program
- Individual skills competition
- Each day will emphasize something different (shooting, defense, offense, situations...)
- T-shirt & basketball

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Any questions may be directed to
Jon Nettleton (208.899.9765) or email at
nettleton.jon@westada.org

All participants are required to bring gym clothes, shoes (for gym use only) & water bottle.

OBJECTIVES: The objectives of the camp are to improve the fundamental skills of basketball. Players will also be instructed on the rules of the game, discipline, and team play.

One of the main objectives is for the campers to have fun and enjoy the game of basketball. The skills taught will be demonstrated by the instructors and practiced by the campers in drills and game situations.

INSTRUCTORS:

Jon Nettleton
Boys Head Varsity Coach
Mtn. View High School
(20 years at MVHS)
(30 years overall)

Assisted by various assistant coaches, current and former players.

PROGRAM HIGHLIGHTS:

'24-'25 --
7 players SIC All-Academic
1 player All-SIC Hon. Mention
1 player Senior SIC All-Star
FROSH League Champions

REGISTRATION:

Participants should register according to what grade they will be **ENTERING IN THE FALL (25-26 school year)**

****T-shirt size is not guaranteed unless the registration form is in by May 1st.**

Mail registration forms and check to:
Jon Nettleton
Mtn. View High School
2000 S. Millennium Way
Meridian, ID 83642

*Make checks payable to Mtn. View Boys Basketball

Registration form Little Maverick Basketball Camp <https://mountainviewboysbasketball.com/?nocache=1> (tear here)

Please fill out all sections Email _____ **ELEMENTARY/MIDDLE SCHOOL** _____

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Session II May 27-30 ~ 12:30 - 3 pm (**Grades 5-8**)

NAME _____ PARENTS _____

Year (25-26) circle grade **K 1 2 3 4 5 6 7 8**

PHONE # _____

T-SHIRT SIZE (youth) **S M L XL** (adult) **S M L XL**

LIABILITY RELEASE AND MEDICAL AUTHORIZATION

My child is in good general physical/mental health and can participate in basketball camp. I understand that any participants not following the rules of the camp may be dismissed without refund. The basketball camp coaches, or employees are authorized to seek medical treatment as necessary in the event of injury, accident, or illness to my child.

Parent/guardian signature _____