# Former Chicago Bulls Champion, Dickey Simpkins

# **NLP Basketball Skill Camp**

Let NLP Help You Be The Next #1 Illinois High School Player! Be The Next NLP Player Invited To The NBPA Top 100 Camp! Be Recruited By Some Of The Top Colleges One Day!

"All This Can Happen For You, But First You Have To Work On Your Skills...
...Start Early So You Can Achieve Your Dream."

**Basketball Camp Details:** 

Dates: June 23rd-27th (1st session: 9am-12pm, 2nd session: 1-4pm)

Ages: Boys, Grades 5th-8th

Location: Prairie Stone Sports & Wellness Center, 5050 Sedge Blvd., Hoffman Estates, IL

Contact: Office: 847-325-5534, website: www.trainnlp.com

#### **Basketball Camp Features:**

Skill Development Training

Competitive Games

• Staff Experience: NBA, Pro-Europe, College, AAU, High School All-American

• Early Evaluation for 2008-'09 NLP Travel Teams 11U - 14U (www.trainnlp.com/aau)

• NLP Jersey, Player Awards, All-Star & Championship Game on NLPTV

• Each Player receives Skill Evaluation Report

Basketball Camp Session Fee: \$200

#### **Extra Features:**

- Position Specific Training (P.S.T.)
- Tuesdays, August 5th 26th, 8 Sessions (Prairie Stone Facility)
- Thursdays, August 7th 28th, 8 Sessions (Prairie Stone Facility)
- Guards Training Time: 7-8:15pm (Boys 5th-8th)
- Forwards/Centers Training Time: 7-8:15pm (Boys 5th-8th)
- NLP T-Shirt
- Trained By Chicago Bulls Champion, Dickey Simpkins and Staff
- P.S.T. Fee: \$400 (8 sessions)
- P.S.T. Fee plus Basketball Skill Camp: \$550
- \* Directions to camp and training facility goto www.trainnlp.com/location

## NLP Basketball Skill Camp - Registration Form

Athlete Information					
Name:		Email:	Date of Birth:		
Address:		Phone:	Age:		
City, State, Zip:		Cell:	Year '08-'09: <b>5th 6th 7th 8th</b>		
Height:	Weight:	Graduation Year:			

Basketball Information		
School Team:		
School Team Address:		
Coach:	Players Position:	Players Skill Level: Beginner Intermediate Advance
Last Travel and/or AAU team played for:		Jersey Size: S M L XL 2XL

	Fami	ily Information	
Parents Name:			
Parents Address:			
Home Phone:	Work:	Cell:	Email Address:
Emergency Contact Name/Relationship:			Contact Number:

Payment Information				
Basketball Skill Camp: \$200	P.S.T. \$400	Basketball Skill Camp + P.S.T. \$ 550		
payment to: NLP, 250 Parkway I	Drive, Suite 150, L	fice: 847-325-5534 Fax: 847-821-7946. Mail incolnshire, IL 60069. Drop offs during Line @ <u>www.trainnlp.com</u> . Payment in full by		

#### **WAIVER AND RELEASE OF LIABILITY**

I understand that although Next Level Performance, Inc.'s programs are designed to provide a safe level of beneficial exercise, training and enjoyment, there is an inherent risk that participation in such exercise and training activities may result in personal injury(ies) to me. Therefore, I hereby specifically agree to assume any and all risks of personal injury(ies) to me while participation in Next Level Performance, Inc.'s programs, and I hereby waive any and all claims or actions I may have against Next Level Performance, Inc., its agents and employees, as a result of and/or for such injury(ies), including, but not limited to the following:

1. Personal injuries arising from my use of any exercise equipment;

- 2. Personal injuries arising from my participation in supervised and/or unsupervised activities and/or programs in any area of the training facility in which the Next Level Performance, Inc. program is administered;
- 3. Personal injuries and/or medical disorders resulting from exercising and/or training in said training facility including, but not limited to, heart attacks, strokes, heat stress, sprains, broken bones, torn muscles, torn ligaments, etc.:
- 4. Accidental personal injuries within said training facility;
- 5. Aggravation of preexisting medical conditions, medical disorders and/or physical injuries. I specifically agree to hold Next Level Performance, Inc., its agents and employees, harmless from any and all legal actions that might arise out of such injury(ies).

I also acknowledge the existence and the necessity for rules and regulations governing my participation in Next Level Performance, Inc.'s programs, including but no limited to those governing the use of equipment, facilities, and participation in programs and services. I hereby agree to comply with all applicable rules and regulations promulgated by Next Level Performance, Inc.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS WAIVER AND RELEASE, AND FULLY UNDERSTAND ITS CONTENTS. I ALSO ACKNOWLEDGE THAT BEFORE I SIGNED THIS AGREEMENT, INCLUDING THE WAIVER AND RELEASE, I HAD THE REASONABLE OPPORTUNITY TO EXAMINE IT.

Applicant's signature	Date
Parent/Guardian Signature	Date
(If Applicant Under The Age Of 18)	

### **Model Release**

For valuable consideration, the receipt and sufficiency of which are hereby acknowledged, I, the undersigned, hereby irrevocably consent to and authorize Next Level Performance, Inc. a Illinois corporation ("Next Level Performance, Inc. (NLP)), and/or anyone authorized by Next Level Performance, the use and/or reproduction of (i) any and all photographs containing my person, image or likeness: (ii) any and all audio recording containing my person, name or voice: and/or (iii) any and all video recording containing my person, image, likeness, name or voice: for any lawful purpose whatsoever.

Signature:
Parent/Guardian Signature:(If applicant under the age of 18)
Name:
Address:
City:
State: Zip:
Age:
Acknowledged:
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Next Level Performance, Inc. Representative