



**Jay Ladner's  
Junior High  
Team Camp Application**

June 17, 2017

School / Team Name: \_\_\_\_\_

Head Coach Name: \_\_\_\_\_

Head Coach E-mail: \_\_\_\_\_

Head Coach Cell #: \_\_\_\_\_

Assistant Coach(es) Name(s): \_\_\_\_\_

\_\_\_\_\_

Assistant Coach(es) Cell #: \_\_\_\_\_

Team(s) Participating:                      7<sup>th</sup>                      8<sup>th</sup>                      9<sup>th</sup>

**\$200 Per Team**

*Make All Checks Payable To:  
Jay Ladner Basketball Camp, LLC*

**Please Return Application ASAP To:**

*Jay Ladner's Team Camp  
SLU Box 10309  
Hammond, LA 70402  
(985) 549-3744*