

IMPACT

BASKETBALL

ASIA PACIFIC

HEAD COACH
AVI MEYERSON -
FORMER NCAA DIVISION 1
COLLEGE COACH

OVER 35 AUSTRALIANS & NZ PLAYERS TO COLLEGE IN LAST 18 MONTHS

PREVIOUS CAMP ATTENDEES



Keeto Browne,
Current Impact Player 2015



Michael Wearne,
Eastern Washington 2015



Deng Adel, Louisville 2015

"IT'S MORE THAN A BASKETBALL CAMP"
UNLIKE ANY CAMP YOU WOULD HAVE EXPERIENCED

VENUES: MELBOURNE - SYDNEY - BRISBANE - ADELAIDE - PERTH - AUCKLAND

SYDNEY COMETS CAMP JULY 9th & 10th 2015

All Programs. 9am to 3pm.

TRY OUT FOR OUR US DECEMBER TOUR OR TO ATTEND IMPACT USA
Contact us for more information.

Register Online at

www.impactasiapacific.com.au

Or Call (03) 9415 6112

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PRESENTED BY



www.impactasiapacific.com.au

CAMP FEATURES

- Intense NBA style Impact training drills.
- Impact Performance Training system to improve, balance, speed, flexibility, functional strength.
- Game situations to improve game performance.
- Guard & Post player specific sessions.
- Unique drills never before seen in Australia.
- A camp experience like no other. Not to be missed.
- US College Information & Pathways information.

VENUES: SYDNEY - Sydney Comets July 9th & 10th Comets special price \$140.00 Instead of \$165.00

* Comets camp is for 14 year olds and over only. A \$25 discount applies to all Comets players. So it is \$140 instead of Our usual 2 day of \$165. All prices online will show \$165 for any non comets players who may attend.

Registrations open for Comets players until 30th May. Any vacant places available to other association players as of June.

PLAYERS 14 to 19 YEARS OF AGE. BOYS & GIRLS. (REPRESENTATIVE PLAYERS ONLY).

PLACES LIMITED REGISTER EARLY.

BASKETBALL CAMP REGISTRATION

Register online at www.impactasiapacific.com.au OR call (03) 9415 6112 OR fill in the below form and post to PO Box 4116, Balwyn East Vic

I wish to attend the _____ Camp/Clinic . Player(s) Name _____

Age _____ Birth date ____/____/____ Shirt Size XS S M L XL XXL Reversibles \$40.00. T Shirt Provided.

Address _____ City _____ State _____ Post code _____

Parent/guardian name _____ Phone (Mbl) _____ Phone (h) _____

Email _____ Rep Team. _____

Is there any medical condition or allergies that our coaches should know about? _____

Payment enclosed: \$ _____ Please make your cheque payable to Australian Basketball Services Pty Ltd.

Card Payments: Cardholder name: _____ Card No: _____

Expiry Date: ____/____ (Month / Year) MasterCard / Visa Only . I give permission for my son / daughter to attend the Impact Basketball camp. I understand that the camp organizers will make every effort to ensure the safety of my child. I will not hold them responsible for any injuries that occur during the camp. Any images taken can be used for future promotional use.

Signature: _____ Date _____