2026
SUMMER CAMPS

HOOPS AMERICA

Register Any Time During the Summer Season!

SUMMER REGISTRATION TUITION

1 Week (4 Days) $300 • **2 Weeks** (8 Days) $600
3 Weeks (12 Days) $875 • **4 Weeks** (16 Days) $1,000

REGISTER TODAY! **LOCATION**: Randolphville Elementary School (501 S. Randolphville Rd, Piscataway, NJ)

INFORMATION

Date _____

Player's Name _____ Gender (Circle) Boy / Girl

Parents or Guardian _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Mobile _____ Other _____

Emergency Contact _____ Phone _____

Email (Family) _____ Email (Player) _____

Birthday _____ / _____ / _____ Grade _____ School _____

Source (Circle) Friend / Mailer / Web / Other _____ Referral Name _____

2026 SUMMER CAMP SCHEDULE (Students may switch their weeks at any time. Each Summer Camp week offer (4) Summer Camp Days). Register now and you may retain your week or switch to the week of your choice!

WEEK 1: June 29- July 2
WEEK 2: July 6- July 9
WEEK 3: July 13- July 16
WEEK 4: July 20- July 23
WEEK 5: July 27- July 30
WEEK 6: August 3- August 6
WEEK 7: August 10- August 13
WEEK 8: August 17- August 20

GRADES 1-8 GIRLS & BOYS: 9:00am-12:00pm

HIGH SCHOOL GIRLS & BOYS: 12:00pm-2:00pm
** High School price is $220 per week*

- 4-Day Camp
- 2026 HS Graduates & College Players Are Eligible for Camps!
- There is some flexibility to train with an older/younger group.

TUITION PAYMENT

Tuition Payment: Program Amount $_____ + **One-time Registration Fee $25** = Total $_____
(For new members only)

Payment Method: (Circle) Check / Cash

Payment Amount $ _____ Check # _____

Check payable to US Hoops Corporation.
All Summer Camp weeks must be used during the 2026 Summer Season. *NO REFUNDS.*

☐ **Participant Consent**
In choosing to participate in HoopsAmerica/US Hoops Clinic programs, I agree to all rules and regulations of the program. I exempt the HoopsAmerica/US Hoops Clinics, facilities (any facility in which programs are held) & staff members from any and all responsible for any injury I incur. Also I give permission to use individual/team photographs in publications and websites.

☐ **Parental or Legal Guardian Consent**
As the parent or legal guardian of the child named above, I hereby give full consent and approval for my child to participate in HoopsAmerica's basketball training programs. Also, I give permission to use individual/team photographs in publications and websites.

_____ Name of Participant or Parent or Guardian (Print)

_____ Signature of Participant or Parent or Guardian

_____ Date

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