

YOUTH BASKETBALL CAMP

WHO:

ALL BOYS/GIRLS ENTERING
GRADES 1ST – 6TH

CAMP HIGHLIGHTS:

- Develop basic skills including: shooting, dribbling and passing
- Team & gameplay concepts will be taught through small sided activities & games.
- Contests & Competitions – both team and individual including shooting & dribbling
- Individual instruction will be taught
- **BASKETBALLS WILL BE GIVEN OUT AT THE END OF THE CAMP**

WHAT TO BRING:

- Water bottle
- Athletic shoes
- Younger athletes (1st) - advised that a parent stay at camp if you feel your child will need extra supervision



DATE:

Tuesday May 26th
Wednesday May 27th
Thursday May 28th

TIMES:

12 – 1:15 PM
1ST & 2ND grade

1:30 – 3:00 PM
3rd & 4th grade

3:15 – 4:45 PM
5th & 6th grade

LOCATION:

Flasher High School – South Gym

CAMP FEES

\$40: 1ST & 2ND Grade
\$45: 3rd – 6th Grade

DUE
May 15th

Please provide the following information and return to the school or mail to:

Flasher High School
c/o Brian Nieuwsma
Box 267

Flasher, ND 58535
Checks payable to: Brian Nieuwsma

Venmo: **@Brian-Nieuwsma**

Name _____

Age _____ Grade (entering) _____

Address _____

Phone # (Cell) _____

(Home) _____

Bulldog Youth Basketball Camp

Parental Permission/Release Form

I wave & release Flasher Public School from any and all liability from injury or illness going to camp from home or while at camp or while returning home. I as a parent/guardian, hereby give my permission for emergency medical treatment in the event I can't be reached. I acknowledge the health of my child to be ready for the vigorous activity of basketball at the Bulldog Youth Basketball Camp

Parent Signature _____

Date _____

2026 Storm Youth Football Camp

Grades K-6

July 20 - 22



4:00 pm - 5:00 pm CT Grades K - 2

5:15 pm - 6:30 pm CT Grades 3 - 6

Flasher Football Field

Camp Cost: \$50

Includes: T-shirt and awards

Make checks payable to Storm Football Camp

Mail forms to: Jamie Krenz
417 Park Street
Flasher, ND 58535

Registration forms are due July 1st 2026

Name _____ Address _____

City _____ Zip _____ Phone _____

Shirt Size (circle) Youth or Adult: S M L XL _____ Grade _____

Please circle youth or adult AND the size.

I understand the Storm Football Camp Director, coaches, and the Flasher Public School will not be responsible for any injuries or loss of personal property. I hereby agree that I will pay, or cover through my insurance, any medical or hospital expenses.

Parent or Guardian Signature _____ Date _____



2026 STORM FOOTBALL CAMP

July 20 - 22

Grades 7 – 12

7:00 PM – 9:00 PM CT

Flasher Veteran's Field

What to bring: football cleats, shorts or sweat pants, and a water bottle.

Make checks payable to Storm Football Camp. **Cost \$50** Mail to Coach Krenz,
417 Park Street, Flasher, ND 58535.

REGISTRATION FORM DUE July 1st 2026

Name _____ **Address** _____

City _____ **Zip** _____ **Phone** _____

Upcoming Grade _____ **T-shirt size: circle – S - M - L - XL - 2XL - 3XL**

I understand that the Storm Football Camp Director, Coaches, and Flasher Public School will not be held responsible for any injuries or loss of personal property. I hereby agree that I will pay, cover through my insurance, any medical or hospital expenses.

Parent or Guardian Signature _____ **Date** _____



2026 ELEMENTARY BULLDOG VOLLEYBALL CAMP

July 20, 22, and 23, 2026

(Monday, Wednesday, and Thursday)

For Students **Entering** Grades 1-6 (Grades next school year.)

4:00pm-6:00pm Central Time

Camp will be held at the Flasher Public School in the south gym.

Camp Cost: \$45

Includes: T-shirt and awards

Make checks payable to Jerlyn Gabrielson

Mail forms or drop off to Mrs. Gabrielson.

Jerlyn Gabrielson
PO Box 121
Flasher ND 58535

Registration forms are due June 30. Late entries may not receive a t-shirt.

Name _____ Address _____

City _____ Zip _____ Phone _____

Shirt Size (Youth) S-M-L-XL: _____ Grade Next Year: _____

I understand that the Bulldog Volleyball Camp director, coaches, and Flasher Public School will not be held responsible for any injuries or loss of personal property. I hereby agree that I will pay, or cover through my insurance, any medical or hospital expenses.

Parent or Guardian Signature _____ Date _____

Check # _____ or Cash _____



2026 Last Chance Bulldog Volleyball Camp
Grades 7-12 (Next year's grades.)

July 20, 22, 23 (Monday, Wednesday, and Thursday)

No camp on Tuesday.

6:30-8:30 pm Central Time

Camp Cost: \$60

Includes: T-shirt

Make checks payable to Jerlyn Gabrielson

Mail forms or drop off to Mrs. Gabrielson.

Jerlyn Gabrielson
PO Box 121
Flasher ND 58535

Registration forms are due June 30.

Name _____ Address _____

City _____ Zip _____ Phone _____

Shirt Size (Adult) S-M-L-XL: _____ Grade Next Year: _____

I understand that the Bulldog Volleyball Camp director, coaches, and Flasher Public School will not be held responsible for any injuries or loss of personal property. I hereby agree that I will pay or cover through my insurance, any medical or hospital expenses.

Parent or Guardian Signature _____ Date _____

Check # _____

Thank you!