



6th Annual

**Southern California
Competition Clinic**

Saturday, October 20, 2007

At

**Santa Monica College
1900 Pico Blvd.
Santa Monica, CA 90405**

5:00-10:00 PM

6th ANNUAL
SOUTHERN CALIFORNIA COMPETITION CLINIC
Saturday, October 20, 2007
5:00 – 10:00 PM
SANTA MONICA COLLEGE (SANTA MONICA, CA)

\$60 PARTICIPATION FEE FOR INDIVIDUALS/ \$300 FOR TEAMS

A UNIQUE EVENT/OPPORTUNITY

OPEN TO HIGH SCHOOL PLAYERS IN ALL IN ALL GRADES, HIGH SCHOOL TEAMS, AND AAU TEAMS.

This event is designed to provide all players an opportunity to demonstrate their competitive skills to the college coaches, scouts, and media expected to attend.

This will be an intense teaching & exposure format where players will be put in highly competitive situations against top level opposition. It is an opportunity to demonstrate your ability to compete against the best and set yourself apart.

- ❖ Play against top level High School competition from Southern California and other areas.
- ❖ Get evaluated by the West Coast's top scouts and media like Dino Trigonis (Fullcourt Press), Joel Francisco (ESPN), Gerry Freitas (Hoop Review).
- ❖ Each player will receive "Competitive Drills" handout (these individual skill work drills will be taught in the clinic).
- ❖ A report on the event will be done by the Hoop Review Scouting Service to be sent to college coaches and various internet sites.
- ❖ Camp will be coordinated by Gerry Freitas, who has 21 years of coaching experience (18 at the 4 year level) & 15 years of scouting service experience and Jesse Teplitzsky, Head Basketball Coach at Santa Monica College.

**** SIGN UP NOW BECAUSE SPACE IS LIMITED!!**

THIS APPLICATION MAY BE XEROXED

SOUTHERN CALIFORNIA COMPETITION CLINIC
REGISTRATION FORM

Please fill out and send form and payment to:
Gerry Freitas, 1919 Fruitdale Ave., #D-2 San Jose, CA 95128

A participation fee (\$60 for individuals/\$300 for teams) must accompany your application and be received by October 11, 2007. Please make cashier's check or money order payable to "Gerry Freitas". (NO PERSONAL CHECKS).

Name_____School_____

Home Address_____

City_____Zip Code_____Phone()_____

E-mail_____

H.S. Grad Yr._____Height_____Weight_____

SAT Score_____ACT Score_____GPA_____

School Coach_____

HEALTH AND BEHAVIOR GUIDELINES AND WAIVER OF LIABILITY

Health Insurance Co._____

Policy No._____Group No._____

I understand that any Southern California Competition (SCCC) participant who does not abide by the rules, regulations and policies established by SCCC is subject to dismissal without reimbursement or recourse and I hereby waive and release the SCCC & Santa Monica College (SMC) from any and all liability for any injury or illnesses while participating in the camp. I hereby authorize the directors of SCCC and SMC to act according to their best judgement in any emergency if I cannot be contacted. I understand that each camp participant is required to have their own medical and accident insurance.

SIGNATURE OF PARENT OR GUARDIAN

CALL GERRY FREITAS AT 408-998-1327 FOR FURTHER INFORMATION OR EMAIL:
GERRY.FREITAS@HOTMAIL.COM