



**RICHMOND KNIGHTS
BASKETBALL HOLIDAY CAMPS
2014-15**

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 RichmondKnightsBasketball

Every school holiday Richmond Knights provide basketball holiday camps at our 2 club venues - Waldegrave School in Twickenham and Christ's School in Richmond.

Ages: 5-12 yrs – open to boys and girls of all abilities

Time: 10.00am to 3.00pm each (early drop-off club from 8.45-9.45am, £2.00 fee)

Cost: £25/day (book any 4 days and receive a 5th day for free. Days do not have to be consecutive and can cover numerous camps but must all be booked in one transaction).

BOOKING PROCEDURE

OPTION 1: Telephone the club office on 020 8797 0477 to pay by debit/credit card (DC:50p/CC:£1.00).

OPTION 2: Complete the booking form (below) and hand in to your RKBC coach (*Cheques payable to Richmond Knights).



Dream Teams



- Players are assigned a team for the entire time they attend the camp.
- League games every morning and afternoon to develop competitive experience
 - Team building exercises and competitions
 - Focus on understanding of what it takes to be a part of a team and build the characteristics of a great team-mate.
 - The final day is playoff day with all teams having a shot at the championship title!

Battle Camp



- The basketball court is a battle ground! Earn your armour and be prepared for battle!
- Individual skills training programme
 - Each skill relates to a different piece of armour that is needed to succeed on the basketball court.
 - Coaches teach the specific skills and players are tested on their performance
 - Once a player has passed all the skills and completed their armour, they receive a Richmond Knights wristband and then move on to the next level.

2014-15 DATES	Waldegrave School, Fifth Cross Rd, Twickenham,	Christ's School, Queens Rd, Richmond, TW10
	TW2 5LN	6HW
Summer Half-Term	May 26,27,28,29	May 26,27,28,29
Summer	Jul 27,28,29,30,31	No Camp
	Aug 10,11,12,13,14	
	Aug 24,25,26,27,28	

RICHMOND KNIGHTS BASKETBALL CLUB: HOLIDAY CAMP BOOKING FORM

CHILDS NAME: _____ SCHOOL: _____ YEAR GROUP: _____

D.O.B: _____ HOUSE NO: _____ POST CODE: _____

EMERGENCY TELEPHONE NO: _____

RELEVANT MEDICAL CONDITIONS: _____

EMAIL: _____

BOOKING DATES/VENUES: _____

TOTAL FEES (£25/day - every 4 days booked = 1 free day): _____

PARENT/GUARDIAN NAME: _____

SIGNED: _____ DATE: _____