

# ELMHURST BASKETBALL SKILLS CAMP

## AT ELMHURST UNIVERSITY

### CAMP INFORMATION: SUMMER 2025

**Session 1:** July 8-11      8:30am-12:30pm

**Session 2:** July 14-17      8:30am-12:30pm

**Session 3:** July 21-24      8:30am-12:30pm

**Specializing in Girls & Boys, Ages 4-13**

**\$295 Tuition—Limited Enrollment**

- **Four Different Skill Development Groups**  
(4-6) 6 Foot Hoops - (7-9) Lowered Hoops for Skill Work - (10-11/12-13) Regulation Hoops
- **Professional Staff of Certified Coaches/College Players**
- **Competition & Awards—Every Day**
- **Free T-Shirt & Player Evaluation**
- **Located at R.A. Faganel Hall (Elmhurst University)**

### **Questions?**

Call John Baines at (630) 617-3147 or [john.baines@elmhurst.edu](mailto:john.baines@elmhurst.edu)

### CAMP INFORMATION

- **Sessions to be held INDOORS**
- **Sign-Ups close to July 1 may have a delay for a t-shirt or be refunded the cost**
- **Day of camp sign-ups are not guaranteed due to limitations**

### CAMP DIRECTORS



**JOHN BAINES** John Baines is directing his 21st camp and been coaching for 26 years. He has been named the Illinois Basketball Coaches Association (IBCA) coach of the year 2020 & 2015. He owns the best winning percentage as a head coach at both University of St. Francis and Elmhurst University

(present) in both school's history. He has guided the Bluejays to 5 NCAA tourney trips & most recently to the National Championship game in 2022. Baines is married to wife, Emily, and has two children, Sloane and Jackson.



**JOHN CHENG** John Cheng will be entering his 3rd year as an assistant men's basketball coach Elmhurst University. As a veteran of the Basketball Skills Camp, Cheng will be entering his 4th season at camp. Cheng spent his basketball playing career at Denison and has coached at University of Chicago and Hillsdale

College. He grew up as an Elmhurst resident and attended IC Catholic Prep.



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## CAMP APPLICATION

## CONSENT

Camper's name: \_\_\_\_\_

Gender (circle one) MALE FEMALE

Age at Time of Camp: \_\_\_\_\_

Email: \_\_\_\_\_

Address (City, State, Zip) \_\_\_\_\_

Home Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

T-Shirt Size (circle one) **Child:** YS YM YL **Adult:** S M L XL XXL

PLEASE CIRCLE YOUR SESSION(S):

**Session 1:** July 8-11 FEE: \$295

**Session 2:** July 14-17 FEE: \$295

**Session 3:** July 21-24 FEE: \$295

**TWO Sessions:** Pick Two & Indicate Sessions FEE: \$550

**CAMP REGISTRATION & DISCOUNTS** (Discounts Limited to One Per Camper):

**Return Application & Payment (No Fee Applied):** John Baines, Elmhurst University, 190 Prospect Ave, Elmhurst, IL 60126

Please Make Checks Payable To: **John Baines**

**Register Online (Non-Refundable Fee Applied):** [elmhurstmbbcamps.com](http://elmhurstmbbcamps.com)

- Great Teammates:** If you have three or more campers from a club team or school team, take \$10 off each registration.  
Please mail registrations together.
- Tons of Campers:** If you have three or more campers from your household, take \$20 off each registration.  
Total of \$60 or more. Please mail registrations together.

Player's name: \_\_\_\_\_

Guardian's Name: \_\_\_\_\_

Allergies/Asthmas (circle one)

If yes, please describe In case of emergency

Father's Name: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Cell phone: \_\_\_\_\_

I, the undersigned, hereby certify that I am the legal guardian of the player. I hereby give my permission for the staff of Elmhurst Basketball Skills Camp, during the duration of the camp, to seek appropriate medical attention for the player, for medical attention to be given and for the player to receive medical attention in the event of accident, injury or illness. I will be responsible for any and all costs of medical attention and treatment and have medical insurance to cover these costs. I, the undersigned, for myself and as a guardian of above named player, understand that basketball is an active, physical sport, and that injuries can take place during play. I also understand that there will be a number of other players attending the camp, there will be a limited number of staff and that our child cannot receive individualized attention all the time. We hereby acknowledge that our child is physically fit and mentally capable of participating in camp activities. I, the undersigned for myself, my heirs, executors and administrators, waive, release and forever discharge Elmhurst Basketball Skills Camp and its staff and assign of and from all rights and claims for damages, injury or loss to person or property which may be sustained or occur during participation in camp activities or while at the camp, whether or not damages, injury or loss due to negligence.

Signature of Parent/Guardian:

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