

PAUL HOWES



2026 TOP 100 BASKETBALL CAMP

For Boys and Girls
Going into Grades 4-12

June 22-25
Monday - Thursday

Maynard High School
Tiger Drive, Maynard

More information please call Paul &
Kristyn Howes at 978-821-1164.

TOP 100 BASKETBALL CAMP

DATE: June 22-25

PLACE: Maynard High School
Tiger Drive, Maynard MA

TIME: 9:00am-1:00pm

TUITION: \$150/per player;
Sibling Discount: \$25 off for each
additional family member. All
players will receive a T-shirt at the
end of the camp.

PAYMENT/REGISTRATION:
Please make checks payable to Paul
Howes.

Please mail the completed
registration form and payment to
Paul Howes, 4 Wilson Circle,
Maynard MA 01754.

Your registration is confirmation of
acceptance in the program.

Registration form and payment must
be received by June 1st to ensure your
child's space in this camp. We will
only accept the first 100 campers.

WHAT TO BRING: Personal
Athletic Equipment: Sneakers,
socks, shorts, shirts & sunblock.

Please bring plenty of water, lunch,
and snacks daily.



BASKETBALL CAMP PROGRAM:

- Stretching and Conditioning
- Station Drills
 - Ball Handling
 - Passing and Shooting
 - Rebounding
 - Offensive and Defensive Techniques
- Individual Instruction
- Emphasis on Fundamentals
- 1 on 1 Contests
- 3 on 3 Contests
- 5 on 5 Daily Games
- Free Camp Shirt
- Free Throw Contest

The curriculum will be carefully supervised. Players will be broken up into groups by grade. These groups will participate in an equitable and competitive system of organized play. Daily emphasis will be given to shooting, ball handling, rebounding and offensive techniques.

Parents should drop off and pick-up players at Maynard High School each day.

CAMP DIRECTOR

Paul Howes

Paul Howes has been a Head Boys Varsity Basketball Coach for 25+ years and is the most successful basketball coach in the history of Maynard High School Basketball, with:

- Over 400 Wins
- 23 State Tournament Appearances
- 21 Clark Tournament Appearances
- 12 League Championships
- 4 Clark Tournament Championship
- 6 State District Championship
- 6 State Sectional Championship
- 2 State Championship
- 5 Time Coach of Year
- 1 Time Man of Year

The deep commitment that Paul has for individual improvement and team play, combined with his 25+ years of experience instructing children, provide a unique background for this basketball camp.

Student Name: _____

Sex: M F School _____

Height _____

Grade _____

Address: _____

Phone: _____

Email: _____

I (Parent or Guardian) agree, by enrolling my son/daughter that he/she is physically able to participate in all the clinic's activities. In case of a medical emergency and I cannot be reached, I hereby give permission to the physician selected by the staff to hospitalize and secure medical treatment for my child. I understand that my medical insurance is expected to cover my child's injuries. I agree not to hold the Maynard School District or the Paul Howes Top 100 Basketball Camp responsible for any injury that may occur to my son/daughter while participating in the camp. I also realize that the Maynard Public School District is not sponsoring the camp.

Parent (or Guardian) Signature: _____

Date: _____

Medical Insurance _____

Please send an application to my friend: _____

Policy #: _____

Name: _____

Adult T-Shirt Size: S M L XL Tuition Enclosed: \$: _____

Address: _____

Please make check payable to PAUL HOWES Mail to: PAUL HOWES, 4 Wilson Circle, Maynard, MA 01754

For more information contact PAUL HOWES; Phone: 978-821-1164