

COUGARS SUMMER BASKETBALL CAMPS

I wish to apply for enrollment in the 2008 Cougars Basketball Camp

PLEASE CIRCLE CAMP ATTENDING:

SR. HIGH GIRLS, \$30.00

SR. HIGH BOYS, \$30.00

JR. HIGH GIRLS, \$30.00

JR. HIGH BOYS, \$30.00

LITTLE COUGARS CAMP, \$20.00

Name _____ Boy / Girl Circle One

Address _____

City _____ State _____ Zip _____

_____ Day Phone _____ Cell Phone

Grade Fall 2008 _____ Age _____

_____ Insurance Co. _____ Policy Number

Waiver:

I hereby authorize the staff of college heights basketball camps and the athletic medical trainer to act for me according to their best judgment in any medical emergency and I hereby waive and release said person(s) from any and all liability from injuries incurred while at cougars basketball camp.

sign parent or guardian

print parent or guardian

NOTE: Both insurance form & the camp waiver must be completed to be officially enrolled