

**LADY WILDCAT BASKETBALL
CAMP
WARWICK VALLEY HS**



**JULY 11th-15th
9AM-3PM
Grades 2 - 10**

- **Early drop off and late pick up available**
- **Skill instruction**
- **Games, Contests, Awards**
- **Make lifelong friends**
- **Report card**
- **Make checks payable to:
Purple Champions Club Girls Basketball**
- **Discounts for Siblings**

GREAT GAME GREAT FUN

MAIL TO:

Purple Champions Club
31 Harding Way
Monroe, NY 10950

LADY WILDCAT CAMP APPLICATION

NAME: _____

GRADE ENTERING: _____

ADDRESS: _____

PHONE NUMBER: _____

EMERGENCY CONTACT: _____

EMERGENCY #: _____

EMAIL ADDRESS: _____

PLEASE CIRCLE SHIRT SIZE: S M L XL XXL

PURCHASE EXTRA T-SHIRT \$10 S M L XL XXL

ALL SHIRTS ARE IN ADULT SIZES

I WOULD LIKE TO ORDER THE PIZZA LUNCH FOR AN EXTRA \$25 DOLLARS. INCLUDES 2 SLICES, SNACK, AND A DRINK MONDAY THROUGH FRIDAY.

YES

NO

TOTAL COST FOR CAMP AND LUNCH: \$175

TOTAL COST FOR CAMP: \$150

I HAVE ADEQUATE MEDICAL INSURANCE, AND I, THE UNDERSIGNED, SUBMIT THAT MY SON/DAUGHTER IS PHYSICALLY FIT AND HAS MY PERMISSION TO ATTEND AND PARTICIPATE IN THE LADY WILDCAT BASKETBALL CAMP. I AGREE TO WAIVE AND INDEMNIFY WARWICK VALLEY BASKETBALL CLUB INC., WARWICK VALLEY SCHOOL DISTRICT, LADY WILDCAT BASKETBALL CAMP AND ALL CAMP EMPLOYEES FROM ANY CLAIM AS A RESULT OF INJURY AND OR LOSS. I HEREBY AUTHORIZE THE DIRECTORS OF THE LADY WILDCAT BASKETBALL CAMP TO ACT FOR ME ACCORDING TO THEIR BEST JUDGMENT IN ANY EMERGENCY SITUATION.

SIGNATURE OF PARENT/GUARDIAN _____ DATE _____