2017 SAINTES

GIRLS’ BASKETBALL CAMP

JULY 17-21, 2017 at ST. ALBERT HIGH SCHOOL

GRADES 3-4-5 FROM 8:00-10:00

GRADES 6-7-8 FROM 10:00-12:00

FEE: $60. CHECK PAYABLE TO ST. ALBERT HIGH SCHOOL

CAMP DIRECTOR: DICK WETTENGEL

TELEPHONE #: (H) 712 325-0209 (C) 402 594-5220

CUT AND RETURN BOTTOM HALF OF REGISTRATION FORM TO DICK WETTENGEL 109 MEADOW LANE CO BLUFFS, IA 51503 or send to St. Albert office

REGISTRATION FORM (MEDICAL RELEASE FORM ON BACKSIDE)

NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_GRADE IN 2017-2018\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE\_\_\_\_\_\_\_\_ ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SCHOOL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AGE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_\_\_\_\_\_\_

PARENT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT’S EMAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PERSON TO CONTACT IN EMERGENCY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMERGENCY CONTACT #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T-SHIRT SIZE: (CIRCLE ONE) Youth Med YLarge Adult Small AMed ALarge

OPEN GYMS FOR THE SUMMER:

EVERY TUESDAY-THURSDAY BEGINNING JUNE 6-JULY 27

TUESDAYS: GRADES 7-12 GIRLS 12:00-2:00

THURSDAYS: GIRLS GRADES 3-7 12:00-2:00

INCOMING 8TH GRADE GIRLS:

 STRENGTH TRAINING M-W-F 6:30 A.M.-7:45 A.M. BEGINS JUNE 5

 BASKETBALL WORKOUTS FOLLOWING ON W-F UNTIL 9:30

MEDICAL INFORMATION AND CONSENT:

ANY PERTINENT MEDICAL INFORMATION WE SHOULD BE AWARE OF (allergies, diabetes, seizures, medications, head or other injuries, restrictions): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I hereby request that you accept this application for enrollment in the Saintes Basketball** **Camp. I hereby release Coach Dick Wettengel and staff for all claims on account of any injuries which may be sustained while attending camp. I also certify that my daughter is medically fit to participate in the camp.**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SIGNED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**