

# **Lady Orange High School Basketball Camp and Summer League**

**June 3<sup>rd</sup>- 7<sup>th</sup>**

**Grades 9-12 (Fall 2019)**

**Cost \$40 Includes Camp T shirt and Summer League Fee**

<b>CAMP INFO:</b> <u>TIME:</u> 8:00AM-NOON  <u>PLACE:</u> BEATRICE MIDDLE SCHOOL	<b>SUMMER LEAGUE INFO:</b> FIRST GAME STARTS AT 5:00PM. SCHEDULES WILL BE HANDED OUT. WE WILL HAVE 3 TEAMS AND EACH TEAM WILL PLAY TWO GAMES.  COURTS AT THE HIGH SCHOOL AND MIDDLE SCHOOL.  WEDNESDAY NIGHTS IN JUNE.
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Please make checks payable to Beatrice Girls Basketball Club and complete & return the form below. Please send to JALEN WEEKS AT BEATRICE HIGH SCHOOL 600 ORANGE BLVD. BEATRICE, NE 68310 or bring on the first day of camp.

**Participant Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ (Fall 2019)

**Date of Birth:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**T-Shirt Size:** S M L XL

**Parent/Guardian Name:** \_\_\_\_\_ **Player's phone:** \_\_\_\_\_

**Father's Cell Phone:** \_\_\_\_\_ **Mother's Cell Phone:** \_\_\_\_\_

**Parent Email:** \_\_\_\_\_

I certify that \_\_\_\_\_ has my permission to participate in the Lady O Basketball Camp and Summer League. I further certify that the above recreational player has medical insurance in case of injury or emergency. I hereby waive and release Beatrice Public Schools, the Camp, and instructors from any liability for any injuries while at camp and summer league.

Parent or Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_