

Summer Hoop Camp 2020

Registration Form

Camper(s) Name(s): _____

Current Grade(s): _____ Age(s): _____

Please **CIRCLE** :

T-Shirt: **Adult** **Sm** **Med** **Lg** **XL**
Youth- **Sm** **Med** **Lg**

Camp: **#1** **#2** **Camps 1 & 2**
(June 29th – July 3rd) (July 6th - 10th)

Release Form: I hereby release the Summer Hoop Camp and its Staff from all claims. I agree that they shall not be held liable for any accidents, injuries, damages, or loss of personal property however caused.

Parent/Guardian Signature: _____ Date: _____

Phone # where you can be reached during the camp if necessary: _____

Mail cheque and completed form to:

Jim Davidson
435 Viceroy Rd.
North Bay, ON P1B 8G4

OR

If you paid online, scan completed form and email to: davidson88@sympatico.ca