**L**a**d**y **R**id**e**r **H**oo**p**s **C**a**m**p

**Date**: July 17-19

**Time:** 8:00am **–** 12:00pm

**Age:** Incoming 5th – 9th grade

**Cost**: $35/ $60 for two children

**Location**: Center High School Gym

The camp will promote basketball fundamentals, competitiveness, and teamwork.

**\*\* T-SHIRTS WILL BE GIVEN TO EACH PARTICIPANT \*\***

Send entries to/and make payable to:

Center ISD Athletics

658 Roughrider Drive

Center TX 75935

**+++ after July 10 - register at camp+++**

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Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Payment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_\_\_ 2017 – 2018 Grade: \_\_\_\_\_\_\_\_\_

Shirt Size: YM YL AS AM AL AXL

I hear by certify, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to participate in the Lady Rider Hoops Camp. I authorize the coaches/directors of the camp to act in their best judgment in any emergency regarding medical treatment or attention to my child. I hereby release any liabilities from Center ISD and the coaches/directors involved.

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_