

# **NEW DATE!!!**

## **LADY DRAGONS**

### **BASKETBALL CAMP**

June 20 & 21

4:00-7:00

Upcoming K - 8th Grade

@ PHS New Gym

\$40



***FREE TSHIRT if you register by May 20!***

**FILL OUT & MAIL THIS PORTION ALONG WITH PAYMENT TO:**

***PEPPERELL HIGH SCHOOL (ATTN: EMILY CLAYTOR)***

***3 DRAGON DRIVE LINDALE, GA 30147***

***\*Make checks payable to PHS***

Participant: \_\_\_\_\_ School: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Tshirt Size: (circle) YS YM YL AS AM AL AXL

I, the parent/guardian of \_\_\_\_\_ release my consent to 1) the treatment of minor illness/accident while attending basketball camp, 2) the administering of emergency medication/surgery upon advice of hospital or trained medical professional, 3) the release of my insurance to cover the above child in case of an emergency.

I also certify my child is physically fit to participate in basketball camp, and I further state that the camp staff and Pepperell High School will not be held liable for accident/illness as a direct or indirect result of participation in camp activities. I also understand that I am responsible for insurance coverage on the above child.

Parent/Guardian Signature \_\_\_\_\_

***For more information contact Emily Claytor at [eclaytor@floydboe.net](mailto:eclaytor@floydboe.net)***