



# 2017 T-BIRD GIRLS' BASKETBALL CAMP

June 7-9, 2017

**GRADES 4-8**

Name \_\_\_\_\_ Parent/guardian name(s) \_\_\_\_\_

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

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

Grade in school, fall 2017 \_\_\_\_\_ Age at time of camp \_\_\_\_\_

Email \_\_\_\_\_ Insurance company \_\_\_\_\_

Policy # \_\_\_\_\_ Policy owner \_\_\_\_\_

I certify that the individual named above is in good physical condition and is capable of taking part in all campus activities. I understand and accept that the risk of injury is possible while playing or practicing basketball. If medical attention is required, I understand that every possible attempt will be made to contact me at the phone number(s) provided. If contact is unable to be made, I hereby give my consent to such medical treatment as deemed necessary by a licensed physician. In addition, I understand and assume all risks resulting from participation in the T-Bird Basketball Camp, and hereby release Casper College and all of its employees from claims on account of any injuries, which may be sustained by my daughter while attending the T-Bird Basketball Camp. This camp admits all qualified applicants without regard to disability, race, color, religion, national or ethnic origin, or sexual orientation.

I hereby certify that I have read and fully understand this authorization.

Parents/guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Camper's allergic reactions \_\_\_\_\_

Medications currently taking \_\_\_\_\_

Any past illness or other information that would be useful in the event treatment is necessary \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Camp fee – \$75** (make check payable to Casper College Girls' Basketball Camp)

**T-shirt size** (please pick one) – Youth: S M L **or** Adult: S M L XL XXL

**Return application and payment to:**

T-Bird Girls' Basketball Camp  
Casper College Athletic Department  
125 College Drive, Casper, WY, 82601

**Application info.**

**Questions or more information call 307-268-3000 or 307-268-2627**