



# 2019 Youth Basketball Camp

Saturday, August 10, 2019  
McDonough 35 Senior High School  
4000 Cadillac Street, NOLA 70122  
8:00a.m. – 4:00p.m.

## Registration Form

Name: \_\_\_\_\_ Age: \_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt#: \_\_\_\_\_ (if applicable)

\_\_\_\_\_

Phone # \_\_\_\_\_ Alternate# \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Emergency Information

Emergency Contact Name: \_\_\_\_\_

Phone#: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

I hereby give my approval for my child's participation in any and all activities prepared by the youth basketball camp. In exchange for the acceptance of said child's participation, I assume all risk and hazards incidental to the conduct of the activities, and release, absolve and hold harmless the Camp and all its respective officers, agents, and representatives from any and all liability for injuries to said child arising out of traveling to, participating in, or returning from selected camp session.

Signature \_\_\_\_\_

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

Printed Name: \_\_\_\_\_

## Please Email the Completed Form To:

Norma Munroe: jeannie684@yahoo.com