Selkirk Saints Basketball Camp Registration Form

July 18-21, 2011 Cost: \$145 All camps are held in the <u>Castlegar Campus Gymnasium</u> Please check one of the following options: Age 9-12 Girls | Age 9-12 Boys | both 10:30am - 3:30pm *groupings will depend on number of registrations First Name:_____ Last Name:_____ Age:_____ Date of Birth:___/___ (dd/mm/yy) Male:____ Female:____ Parent/Guardian First and Last Name:______ Mailing Address:_____ City/Prov:_____ Postal Code _____ Email Address: ______ (please use an address that is checked regularly) Allergies/Medical Conditions: | Emergency Contact and Telephone: Medical Number: T-Shirt Size (please circle one): M L XL (youth sizes) S M L XL (adult sizes) **Previous Basketball Experience** Elementary School: _____ Last school team played on: _____ (if anv) Notable Achievements/Awards (if any): **Payment Information:** Visa____ Mastercard___ Check___ Money Order___ Payment Amount: \$_145__ Credit Card Number:_____ Expiry Date: ____/__ Please send your registration and payment(s) to:

Or Fax to: Camp Info Line: 250.509.0838 Athletics and Rec – Selkirk College 250.365.1206 301 Frank Beinder Way

Registration Deadline is July 11, 2011 ***Limited Spaces Available***
Please include a signed waiver with application form (next page).

For all registration inquires phone 250.368.1991

Castlegar, BC V1N 3J1

Waiver Statement for Camper:

The Selkirk Saints Sports Camps and Selkirk College Athletic Program take pride in providing a safe environment for all athletes and summer camp students. All possible effort is made to provide equipment and facilities that are clean and in good working order. Activities, games, matches and exercises related to any program, athletic event or summer camp are designed to be appropriate and will include qualified and respectable personnel. The Selkirk Saints Sports Camps and Selkirk College Athletic Program recognize that with any athletic activity there is a certain level of risk and that some circumstances are unpredictable and impossible to control or foresee. Your signature at the bottom of this form will confirm that you have read and understood the following statements.

F	Please Pr	rint Name	
discharge Selkirk College and its sany and all liability, claims, demandoss, personal injury, including dea Selkirk Saints Sports Camp or acti	taff, officers, agents, emplo ds, actions and causes of a th or property damage that vities while at camp. I/We v	d administrators, waive, release and forever byees, representatives, successors and assignations whatsoever arising out of or related to may be sustained or occur during participation voluntarily assume full responsibility for any resustained as a result of such activity.	any on in a
testimonials for promotional purpos	ses. I/We understand that t	collect video footage, photographs and/or this media may be used for the purpose of purewspapers, exhibits or related Selkirk Colleg	
Please initial here if you DC and/or testimonials to be co	<u> </u>	your child to be included in video footage, phosses.	otos
Parent/Guardian Signature	Relation	 Date	
Please Print Full Name of Parent/0			