

MARCUS GIRLS' BASKETBALL CAMP

AGE: Rising 6th-9th grade

DATE: May 28th-31st

TIME: 8:00-11:00am

COST: \$100

LOCATION: M.A.C. @Marcus HS

AGE: Rising 1st-5th grade

DATE: May 28th-31st

TIME: 12:30-3:30pm

COST: \$100

LOCATION: M.A.C. @Marcus HS

CAMPER'S NAME: _____

GUARDIAN NAME: _____

GUARDIAN EMAIL: _____

GRADE ENTERING IN THE FALL (circle one):

1st 2nd 3rd 4th 5th 6th 7th 8th 9th

SCHOOL ATTENDING IN THE FALL: _____

WHICH CAMP SESSION WILL THE CAMPER BE ATTENDING (circle one):

6th-9th (morning) 1st-5th (afternoon)

T-SHIRT SIZE (circle one):

Youth S Youth M Youth L Adult S Adult M Adult L Adult XL

EMERGENCY CONTACT NAME: _____

EMERGENCY CONTACT NUMBER: _____

EMERGENCY CONTACT EMAIL: _____

“As a parent/legal guardian of above named camper, I grant permission for pictures to be taken by camp coaches and/or posted on camp social media accounts.”

_____ **AGREE**

_____ **DISAGREE**

I understand there will be a concession stand offered and it will be a **cash/concessions bank**.

AND

“As parent/legal guardian of above named camper, I grant permission to participate in the Marcus Girls' Basketball Camp and acknowledge that she is physically able to participate in camp activities. I also release LISD, Jordan Davis, and all camp employees from any and all claims, demands, and causes of action whatsoever resulting in participation in Marcus Girls' Basketball Camp.”

Parent/Guardian Signature

Date

Make checks payable to Jordan Davis

Mail this form and payment to:

Jordan Davis

304 Lily Ln

Lewisville, TX 75057