## **WARWICK BOYS BASKETBALL CAMP**

Ages: Boys entering grades 3 - 10

## JULY 17 - 21 | 9 AM - 3 PM

Cost: (c	ircle	one	):
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Camper Name:

- \$225 w/ lunch (pizza, chips & water)
- \$200 w/o lunch

Grade Entering:
Medication(s) Needed:
Emergency Phone/Email:

## Jersey Size: (please circle one)

\* We will do our best to make sure your son receives the correct jersey size, but early registrants will have first choice.

Youth L Adult S Adult M Adult L Adult XL

8:00 am drop-off available.

Checks payable to:
Purple Champions Club,
Boys Basketball

Mail check/cash to: Joe Mackey III 13 Sanoset Road Highland Lakes, NJ 07422

Return completed form to Coach Mackey.

Questions? Call 845-537-0244, or email jjmackey3@gmail.com.

**Health Waiver:** I have adequate medical insurance and I, the undersigned, submit that my son is physically fit and has my permission to attend and participate in the Warwick Valley Basketball Camp. I agree to waive and indemnify Purple Champions Club, Warwick Valley School District, Wildcat Basketball Camp and all camp employees from any claim as a result of injury or loss. I hereby authorize the directors of the Wildcat Basketball Camp to act for me according to their best judgment in any emergency situation.

Signature of Parent	/Guardian: 	 
Date:		 