

My child has permission to attend the Dominion Christian Basketball Camp. Enclosed is \$100 payable to Dominion Christian Schools. I have no knowledge of any physical impairment that would affect or be affected by my child's participation in the Dominion Christian Basketball Camp. In the event of an emergency in which my child requires medical care, I authorize the staff of Dominion Christian Basketball Camp to act for me to obtain for my child whatever medical treatment the staff in its best judgment deems necessary and appropriate. I specifically consent to such treatment including but not limited to hospitalization and surgery and will be responsible for any medical or other charges in connection with my child's attendance at the Dominion Christian Basketball Camp. I acknowledge that at the Dominion Christian Basketball Camp my child may risk injury. I specifically release the Dominion Christian Basketball Camp, its owners and staff, as well as Dominion Christian Schools from liability for any claim of damages which I or my child may have for injuries or illness that he/she may sustain at the Dominion Christian Basketball Camp.

Parent Signature



4607 Burnt Hickory Rd
Marietta, GA 30064
770-420-2153



Dominion Christian Schools
June 5-8, 2017



Details

Directors: DCS Basketball Coaches

Time: 9:00-12:00

Who; Boys and girls, Grades 3-9 (Entering the fall); Those interested in improving their basketball skills

When: June 5-8

Where: Dominion Christian Schools' Gym

Cost: \$100

What: An exciting week of basketball including skill development, fundamentals, games and contests.



Registration Information:

Please complete the registration section and turn it in to the school office by May 24th.

Please make checks payable to Dominion Christian Schools. Otherwise, please mail registration forms and checks to:

Dominion Christian Schools
Attn: Chris Schmidt
4607 Burnt Hickory Road
Marietta, GA. 30064

Registration

Camper's Name: _____

Age: ____ Grade in fall 2017: _____

T-Shirt: YL S M L XL XXL

Address: _____

Parent's Information

Name(s): _____

Email: _____

Home Phone: _____

Cell Phone: _____

Emergency Information

Contact Name: _____

Relation to Student: _____

Phone: _____