



## Thanksgiving Basketball Skills Camp

Boys and girls in 2<sup>nd</sup>-8<sup>th</sup> grade

All skill levels are welcome

**Date:** November 25 - 27, 2019

**Time:** 9:00 - 11:30 a.m.

**Where:** Holy Spirit Episcopal School Gym

**Price:** \$125/entry

*\*Please make checks payable to Mitirel Vinzant\**

**Hosted by: Coach Turner - Coach Mitriel - Coach Marge**

Thanksgiving Skills Camp will cover dribbling, shooting, ball handling, defense, offense, rebounding and much more!

Player's First Name \_\_\_\_\_ Last \_\_\_\_\_

Birth Date \_\_\_\_\_ School \_\_\_\_\_ Grade \_\_\_\_\_

Home Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Mother's Name \_\_\_\_\_ Father's Name \_\_\_\_\_

M. Work # \_\_\_\_\_ F. Work # \_\_\_\_\_ Home # \_\_\_\_\_

E-Mail(s) \_\_\_\_\_

I, as parent or guardian of the child named above, give my approval for this child's participation in this basketball camp. I am aware that any athletic activity, such as basketball, involves a risk of accidental injury, despite all safety precautions. I assume all risks and hazards incidental to the program including transportation to and from these activities. I further release from responsibility and agree to indemnify and hold harmless Holy Spirit Episcopal School and any person associated with the tennis program, from liability for any illness or injury of the child occurring during this program. I hereby give permission to the coach, in my absence, to seek any medical attention necessary for my child.

\_\_\_\_\_  
Parent's or Guardian's Signature

\_\_\_\_\_  
Date