

office use only

contact for team: _____

E-mail: _____

phone: _____

**office use only**

MRF _____

room _____

Mail _____

Higher Level Camps
Going back to the Basics Fundamentals Camp
GIRLS: Entering 5th - 12th Grade Fall of 2017

Who: Girls: 5 – 12 grade**Where:** Wayland Academy, Beaver Dam, WI**What:** Basketball Camp**When:** June 14 - 17, 2017**Cost:** \$395**PERSONAL INFORMATION**

Name: _____ Female _____

Address: _____ City: _____

State: _____ Zip: _____ Phone #: _____

E-mail Address: _____ Work #: _____

Parents Name: _____ Cell #: _____

Birth date: _____ Grade: _____ **(based on 2017-18 academic year)****ROSTER INFORMATION**

Position: _____ Height: _____ Interested in Summer Program: _____

Jersey: S M L XL XXL Experience Playing: _____ AAU Teams
 (unisex sizes) (check those that apply) _____ Traveling Teams
 _____ Freshman
 _____ JV
 _____ Varsity

PAYMENT

1. Check # _____ Amount _____

2. HLC Traveling Team Member? _____ yes or no

This is a contract between Higher Level Camps and the responsible paying party. You are under contract to pay in full whether your child attends camp or not. There will be no refunds after you sign up for camp or choose to leave camp early. Refunds given only if you are injured before camp begins and have a doctor's written excuse.

ROOMMATE

(must request each other for us to honor your request)

1st choice _____ 2nd choice _____

(If you play for HLC's traveling teams, we will assign you a roommate)_____
Parents Signature_____
Date_____
Athletes Signature**Please return this Registration Form, Medical Release Form and Payment to address listed below.**