



## 2018 Girls Basketball Day Camp

Hosted by UW-La Crosse Women's Basketball

*Fundamental Skill Development*

*Fun Contests and Games*

*Campers Grouped by Age/Ability to Enhance Instruction*

DATES:	June 18-21, 2018
MORNING SESSION:	9AM – 12PM \$80 per camper
FULL DAY:	9AM – 4PM *Campers bring own lunch \$160 per camper
AGES:	Girls in grades 2-12 *Entering grade fall of 2018
INCLUDED:	UWL Women's Basketball T-Shirt
CAMPERS BRING:	Basketball Shoes, Water Bottle Lunch *Only if full day camper
REGISTRATION:	Online at <a href="http://www.gbasketball.uwlcamps.com">www.gbasketball.uwlcamps.com</a> OR Fill out registration form and mail in
QUESTIONS:	Contact Head Women's Coach Karen Middleton <a href="mailto:kmiddleton@uwlax.edu">kmiddleton@uwlax.edu</a>

Visit **uwlcamps.com** for online registration, printable registration, and more information!



# 2018 Girls Basketball Day Camp

June 18-21, 2018

## Registration Form

*Please print clearly. We cannot process incomplete registration. All information must be provided.*

Participants Full Name: \_\_\_\_\_

Grade (fall of 2018): \_\_\_\_\_

T-Shirt Size (circle):    YS   YM   YL   YXL   S   M   L   XL

Please circle which applies:

Morning Session only (\$80)  
9AM-12PM

Full Day (\$160)  
9AM-4PM

Second Participant's Full Name: \_\_\_\_\_

Grade (fall of 2018): \_\_\_\_\_

T-Shirt Size (circle):    YS   YM   YL   YXL   S   M   L   XL

Please circle which applies:

Morning Session only (\$80)  
9AM-12PM

Full Day (\$160)  
9AM-4PM

ADDRESS: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

EMAIL (necessary for confirmation & camp communication): \_\_\_\_\_

SPECIAL NEEDS FOR PARTICIPANT(S): \_\_\_\_\_

Amount Enclosed: \$ \_\_\_\_\_

Check enclosed, made payable to: UW-La Crosse

**Return form to:**

UW-La Crosse Athletic Camps & Clinics  
25A Mitchell Hall  
1725 State St.  
La Crosse, WI 54601

**WAIVER:** Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. By signing this form, I agree to hold harmless and indemnify UW-La Crosse, their officers, agents, and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if I cannot be reached in the event of an emergency.

PARENT/GARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_