

# JACKSON BASKETBALL SUMMER CAMPS

Camper Name		Shirt Size	
Address			
Parent Name		Contact Number	
Emergency Contact		Emergency Number	
Email			

Camp	Grades	Day	Dates	Times	Cost	GRADE	BOY/ GIRL
Youth Skills Camp	1st thru 4th	T,W,Th	5/28-5/30	9:00-11:00 AM	\$50.00		
Skill/Shooting Finishing Workouts	4th thru 8th	M,Tue, Thur	6/3, 6/4, 6/10, 6/11, 6/13, 6/17, 6/18	1:00-3:00 PM	\$75.00		
Individual Skills and Team Camp	4th thru 8th	M,T,W	6/24-6/26	9:00 AM-4:00 PM	\$100.00		
Ind Training	1st thru 8th	Sign up here if you would like to set up individual skill training					

**TOTAL DUE**

**Make checks payable to Jackson Basketball and mail form to:**

Attention Darrin Scott  
2775 Ridgeway Drive  
Jackson, MO 63755

For more information about Summer Camps send emails to:  
[dscott@indianhoops.com](mailto:dscott@indianhoops.com)

The undersigned, being a parent or legal guardian of the child requesting camp admittance, does hereby affirm that the applicant is in good health and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved. Furthermore, the undersigned has no knowledge of any reason the applicant cannot participate in vigorous physical activity. The undersigned hereby expressly agrees to be responsible for any medical bills incurred in the treatment of any illness or accident. In the event of any such accident or injury, I hereby consent to allowing any of the camp supervisors to pro-cure any medical treatment deemed advisable on behalf of my child or ward with-out prior consent. No primary medical insurance is provided by Jackson High School or the Jackson Basketball Camp. I understand that, as a condition of admittance as a camper, the undersigned, on behalf of the applicant, hereby releases Jackson Basketball Camp, Jackson High School, Darrin Scott, and all other employees or agents of the camp from any and all liability from injuries or illness, mental or physical, suffered by the camper during or related to camp, unless caused by willful act or gross negligence by the person or entity against whom the claim is made.

**Parent Signature**

**Date**