

OFFENSIVE SKILL CAMP

May 21, 2022

9:00 AM-Noon(grades 2-6)

1:00-4:00 pm (grades 7-12)

Name of Camper _____

Home Address _____ City _____ State _____ Zip _____

Email Address _____

Age _____ Grade _____ School Attended _____

Mother _____ Cell Phone _____

Father _____ Cell Phone _____

Emergency Phone Number _____

T-Shirt Size _____ (YM/YL/AS/AM/AL/XL/2XL)

Insurance Information:

Company _____

Policy # _____

Group # _____

PARENTAL RELEASE AND INDEMNITY AGREEMENT

Upon Acceptance of this application and in exchange for the benefit my minor child will receive for participation in Greyhound Basketball Camps; I agree to release Moberly Area Community College, it's Board of Trustees, officers, employees and basketball coaching staffs from all claims on account of injuries or losses which may be sustained by my minor child while attending camp. I agree to indemnify the MACC Board of Trustees, and employees from any claim which may be presented by my/our minor child in the future resulting from attending camp. I understand any camper who does not abide by camp rules may be dismissed from camp with no refund.

Parent Signature _____ Date _____

Please return application with \$25 registration fee (\$30 day of event register)

Patrick Smith

Head Men's Basketball Coach

Moberly Area Comm. College

101 College Ave.

Moberly, Missouri 65270

Make checks payable to Moberly Area Comm. College

