**2019 HIGHLANDS LADY BLUEBIRDS**

**BASKETBALL CAMP**

JUNE 3rd & JUNE 4th

9:00- 11:00

CURRENT GRADES

5TH -7TH

SIGN UP NOW!

LEARN NEW DRILLS TO WORK ON OVER SUMMER BREAK!

LOCATION: HIGHLANDS HIGH SCHOOL GYM

STATIONS: Defense, Ball Handling, Shooting, & Rebounding

* + - Majority of camp will be spent on individual improvement

COST: $40.00/$20.00 daily

DIRECTOR: Jaime Richey 859-815-2652 or Jaime.Richey@fortthomas.kyschools.us

WORKERS: Current players & assistant coaches will be assisting!

SIGN UP ONLINE: www.highlandsathletics.com

**TO GUARANTEE A CAMP SHIRT PLEASE HAVE ORDER FORM BACK BY MAY 15th**

**WILL ACCEPT WALK INS, BUT T-SHIRTS MAY NOT BE AVAILABLE!**

Please detach and fill out bottom section and return with payment to Highlands High School, ATTN: Girls’ Basketball Camp/Jaime

Richey, 2400 Memorial Parkway, Ft. Thomas, KY 41075. **Make checks payable to Highlands High School.**

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2019-20

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GRADE \_\_\_\_\_\_\_ DOB\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I HAVE ALREADY FILLED OUT THE GOOGLE FORM ONLINE AND HAVE FILLED OUT THE INFORMATION BELOW

ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_CITY/STATE/ZIP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PHONE #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMERGENCY PHONE #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 EMAIL\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SHIRT SIZE (circle one): Youth S M L
 Adult S M L XL

WAIVER 2019

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has my permission to attend the Highlands Athletic Camp.  I know of no physical impairment that will affect or be affected by the camp.  I acknowledge that at the camp my child will participate in a sport that may involve, among other things, physical contact with other persons or objects and may incur the risk of injury.  I specifically waive and release the Highlands Athletic Camp, its employees and staff from liability for any damage claims which my child may have from injuries she may sustain at the camp.

PARENT/GUARDIAN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_