

Lady Devil Basketball Camp

June 5th-8th

Hal Henard

Gym

8:30-11:30 AM

Rising 1st-8th

Graders

Camp Application:

Camper's Name _____

Parent/Guardian _____

Address _____

Age _____ Grade _____ School _____

T-shirt Size (Youth Small-Adult XXL) _____

***Make checks payable to Annette Watts Price \$60**

***Mail check and application to:**

Annette Watts

300 Grapevine Trail

Greeneville, TN 37745

Emergency Contact Information

Contact #1

Name _____

Relationship _____ Cell Phone _____

Home Phone _____ Work Phone _____

Contact #2

Name _____

Relationship _____ Cell Phone _____

Home Phone _____ Work Phone _____

Emergency Consent

I hereby authorize the staff of the GHS Girls Basketball Camps to act according to their best judgment in any emergency requiring medical attention. I have no knowledge of any physical impairment that would be affected by the above camper's participation.

Parent/Guardian Signature

Parent/Guardian Email Address:

For Questions Contact:

Head Coach Annette Watts

wattsa@gcschools.net

10% Discount for Siblings