



# BECKMAN CATHOLIC TRAILBLAZER GIRL'S BASKETBALL CAMP

**5<sup>th</sup> - 8<sup>th</sup> grade**

**July 23 - 27**

**8:00 - 10:00 a.m.**

**High School**

**July 23 - 27**

**10:00 - noon**

**COST: \$30.00 - includes t-shirt**

**Checks: Beckman Catholic High School**

**Send to: Girls Basketball Camp**

**Beckman Catholic HS**

**1325 9<sup>th</sup> St. SE**

**Dyersville, IA 52040**

**\*\*Please return form by July 17, 2018**

**Any questions contact Chad Thomason - [cthomason@beckman.pvt.k12.ia.us](mailto:cthomason@beckman.pvt.k12.ia.us) or call Beckman at 875-7188.**

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**NAME:** \_\_\_\_\_ **GRADE (18-19):** \_\_\_\_\_

**PARENT'S:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY/ST/ZIP** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **ALT PHONE:** \_\_\_\_\_

**T-SHIRT SIZE** \_\_\_\_\_

I certify that \_\_\_\_\_ has my permission to compete in the 2018 Basketball Camp. I hereby accept full responsibility for my child in case of accident and for behavior. I understand that Basketball Camp Coaches, Beckman Catholic High School, or any of its agents or employee's cannot be held responsible in the event of an accident or lost items and do waive and release all right and claims of whatever nature they may be. MY CHILD IS INSURED IN CASE OF INJURY. I agree to the above terms and indicate compliance by my signature.

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Signature of Parent or Guardian

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Date