



CHIEFTAIN BASKETBALL CAMP

Monday, June 25th - Thursday, June 28th

Girls and Boys Grades 4-8

at **LUTHER BURBANK MS (LANCASTER)** - 9am-12pm

Cost: Pre-registration: \$90 (mailed by June 9th).

First Day of Camp: \$100

Pre-registration is strongly suggested. Access additional Forms at <http://nrhs.nrsd.net>

Check payable to Nashoba Basketball. Send check and completed form to Danny Ortiz, Nashoba Regional High School, 12 Green Rd., Bolton, MA 01740

Camp Staff:

- Danny Ortiz, NRHS Boys' Varsity Basketball Coach
- Josue Pantojas, NRHS Boys' Varsity Assistant Basketball Coach
- NRHS Boys' & Girls' Basketball Players



Players may arrive and shoot around at 8:30am. Clinic starts at 9am and ends at 12pm

Name: _____

Age: _____

Address: _____ Phone: _____

City, State, Zip _____

T-shirt size: Adult sizes only S M L XL (If not pre-registered cannot guarantee correct size t-shirt)

In case of emergency, notify (name/#): _____

_____ (Name of participant) is physically fit to participate in the activities of the Chieftain Basketball Camp. In the event of any medical emergency where representatives of the camp are unable to contact a parent or guardian of the above participant, I authorize the camp personnel to act in my child's best interest and render any necessary treatment, including hospitalization if necessary. I understand that the Chieftain Basketball Camp does not provide medical insurance for participants. In consideration for the athlete's participation in and enjoyment of the Chieftain Basketball Camp, instruction and facilities, I waive, release and forever discharge the camp, its coaches, directors, agents, promoters, and employees, Nashoba Regional HS and the town of Bolton, its officers, directors, agents, promoters, and employees from any responsibility from any and all liability, claim, loss, rights of action, or for accidents and medical or dental expenses present or future, anticipated or unanticipated, resulting from or arising out of or in incident to participation in this clinic. I waive and release *Chieftain Basketball Camp* and the town of Bolton and Nashoba Regional HS from any responsibility for possessions lost or damaged by weather, water, fire, theft or personal negligence or any injury or illness incurred while at the clinic or traveling to and from any clinic activity.

Signature: _____ Date: _____

Insurance Company: _____ Policy #: _____