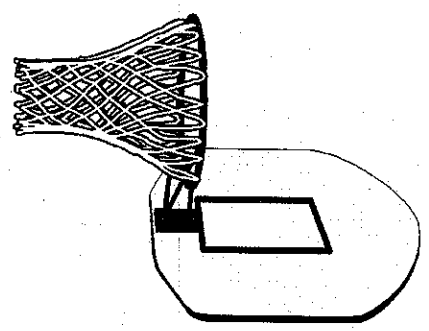


Send this application with  
\$ 60.00

Tuition Enclosed  
(non-refundable)  
Limited Enrollment



Roseburg Boys'  
Basketball Camp  
c/o Mike Pardon  
400 W Harvard  
Roseburg OR 97470

CIRCLE YOUR GRADE  
LEVEL

**Basketball Shoes**  
(Fall 2016)

**T-Shirts given during  
camp**      3   4   5   6   7   8

T-Shirt Size

Youth

S   M   L   XL

Adult

S   M   L



# APPLICATION FORM

NAME: \_\_\_\_\_

Age \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Position \_\_\_\_\_

Name of School \_\_\_\_\_ Year in School \_\_\_\_\_

Parent/Guardian Address \_\_\_\_\_

My son has permission to attend Roseburg Boys' Basketball Camp. Enclosed is \$60.00(non-refundable fee). This will cover full tuition.  
 Person to contact in case of emergency \_\_\_\_\_  
 I understand I am requesting enrollment for the Roseburg High School Basketball camp. The enrollment is limited and applications are accepted in the order they are received. I will comply with camp rules.

APPLICANTS SIGNATURE \_\_\_\_\_

In the event of illness or injury I hereby give my consent for medical treatment and permission to the attending physicians to hospitalize, secure proper treatment and order injections, anesthesia or surgery. I will be responsible for any medical or other charges in connection with his attendance at camp.  
Parents/Guardian Signature \_\_\_\_\_

He is covered by \_\_\_\_\_ Insurance Co. & Policy # \_\_\_\_\_

Send this application with \$60.00  
 Tuition Enclosed (non-refundable, one session)  
 Limited Enrollment

Roseburg Boys' Summer Basketball Camp  
 400 W Harvard  
 Roseburg OR 97470