

12th ANNUAL



Britton

Johnsen & Johnsen Basketball Camp 2015

Jeff

Special guests and lots of contests, awards and prizes!

MISSION: To provide a fun, energetic, learning atmosphere that will allow campers to improve their basketball skills and receive personal instruction based on individual needs.

WHERE: Murray Parks and Recreation Center, 296 Murray Park Lane, Murray, Utah

SESSIONS/DATES/TIMES:

Next school year

Camp 1: JULY 13th - JULY 17th | 9:00 am - 11:30 am | Grades 2-6 | \$ 150.00

Camp 2: JULY 13th - JULY 17th | 1:00 pm - 3:30 pm | Grades 7-10 | \$ 150.00

Camp Includes:
Games • Teams • Contests
Skill Work/Fundamentals
Individual/Team Awards
Fun! Fun! Fun!

PLEASE CUT ON DASHED LINE AND RETAIN TOP PORTION FOR YOUR RECORDS

APPLICATION and MEDICAL RELEASE FOR PARTICIPATION in JOHNSEN & JOHNSEN BASKETBALL CAMP 2015

FOR MORE INFORMATION PLEASE CALL: Murray Parks and Recreation at 801-264-2614 or 801-580-5082
OR SIGNUP ONLINE AT: www.johnsenbasketballcamps.com

Please make checks payable and mail application to:

Johnsen & Johnsen Basketball Camp 2015
566 E. Eastpointe Circle, N. Salt Lake, UT 84054
Upon receipt of registration and full payment a confirmation e-mail will be sent to you. Thank you!

Please check one session below, one camper per form

- Camp 1:** July 13th - July 17th | 9:00 am - 11:30 am | Grades 2-6 | \$ 150.00
- Camp 2:** July 13th - July 17th | 1:00 pm - 3:30 pm | Grades 7-10 | \$ 150.00

MULTIPLE CHILDREN FAMILY DISCOUNT:

Families with 2 or more participating children pay full price for first child and receive \$20 off each additional sibling.

PARTICIPANT INFORMATION

T-Shirt Size (CIRCLE ONE): Youth Sizes - S M L XL Adult Sizes - S M L XL XXL

Name: _____ E-Mail (to receive registration confirmation): _____

Phone: _____ Age: _____ Grade (next school year): _____

Address: _____

City: _____ State: _____ Zip Code: _____

Parent/Guardian Names: _____ Home Phone: _____ Work Phone: _____

Person(s) to be Notified in Case of Emergency: _____ Phone: _____

Physical concerns staff should be aware of: _____

WAIVER and RELEASE LIABILITY

Participant and Parents/Legal Guardian(s) represents to Murray Parks and Recreation that Participant is in physically sound condition and has no disability, illness, or other condition preventing Participant from engaging in Johnsen & Johnsen Basketball Camp 2015. Participant understands and acknowledges that participation in this camp could result in injuries, including those resulting in death, and illness incurred while attending camp or occurring as a result of having attended camp, Participant fully understands, accepts, and assumes any and all risks involved with this camp. Participant promises and agrees that Murray Parks and Recreation, Johnsen & Johnsen Basketball Camp 2015, or any agent, employee, or person associated with Johnsen & Johnsen Basketball Camp 2015 will not be held liable or responsible for any claims, damages, theft, or losses arising out of Johnsen & Johnsen Basketball Camp 2015. Furthermore, in an event of an emergency requiring medical attention, Participant shall pay for the services rendered. If I cannot be reached in case of an emergency, I hereby grant Murray Parks and Recreation to have my son/daughter treated by a physician if necessary. I understand and accept this waiver by signing this release.

SIGNATURE OF PARENT/GUARDIAN (INK ONLY): _____

DATE: _____



Fundamentals... and Fun