

INFORMATION

- DATE: August 2, 2013
- COST: \$30/Camper
- Girls entering grades 9-Open (Fall 2013)
- Hours: 9:00 a.m. 4:00 p.m. Lunch will be provided
- Experience a day in the life of a DRAKE WOMEN'S BASKETBALL PLAYER
- Develop leadership skills and qualities along with improving your basketball IQ through film, scouting reports and on court instruction
- Organized competitive games on the Knapp Center court

Visit www.bulldogbasketball.com, or contact David Lane at (515) 271-3482 or david.lane@drake.edu

Name: ______ Grade (Fall 2013): ______ Age: ______ Address: ______ City, State, Zip: _______ Phone: ______ Email: _______ School: _______ Date of Birth: ______ Height: _____ Post: _____ Guard: ______ Emergency Contact Name: ______ Emergency Contact Number: _______ HEALTH RELEASE AND PARENTAL CONSENT This is the application for enrollment of _______ in the Bulldog Girls Basketball Camp. I request that you accept the application for enrollment in the Bulldog Girls Basketball Camp. I grant permission to the camp director, assistants and staff of the camp

This is the application for enrollment of _______ in the Bulldog Girls Basketball Camp. I request that you accept the application for enrollment in the Bulldog Girls Basketball Camp. I grant permission to the camp director, assistants and staff of the camp to act on my behalf for the said minor in granting permission for evaluation/treatment of minor medical problems. I understand that should a major medical problem arise, an attempt will be made to notify me by telephone. In the event that I cannot be reached, I hereby give my consent to such medical treatment as deemed necessary by a licensed physician. In addition, I hereby release the Bulldog Girls Basketball Camp, their employees and agents from all claims on account of any injuries, which may be sustained by my daughter while attending the Bulldog Girls Basketball Camp. I also agree to indemnify the Bulldog Girls Basketball Camp, its employees and agents for any claim, which may hereafter be presented by my minor daughter as a result of illness or accident while my daughter is at the Bulldog Girls Basketball Camp.

Signature ______ Date _____ Make checks payable to: Bulldog Girls Basketball Camp and mail to Drake University, Women's Basketball, 2507 University Avenue, Des Moines,

Make checks payable to: Bulldog Girls Basketball Camp and mail to Drake University, Women's Basketball, 250/ University Avenue, Des Moines, IA 50311. Please call 515-271-2165 with any questions.