

SOUTH BASKETBALL CAMP

REGISTRATION INFORMATION

Player Name: _____ Grade NEXT Year: _____

Address: _____

Phone Number: _____ Number In Case Of Emergency: _____

Parent/Guardian Name: _____

Email Address: _____

T-Shirt Size (Circle One):

YS YM YL AS AM AL AXL

I hereby desire that my child, _____, who is in good physical health, participate in the Canton South Girls Basketball Camp. I voluntarily release the Canton Local School District and the personnel associated with this program/camp from any and all liability for any injuries or illness incurred while at camp.

Signature of Parent/Guardian

CAMP FEE: \$20.00 (GRADES 1-2)...\$25.00 (GRADES 3-8)

ANY QUESTIONS: PLEASE CALL 330-340-0311

**PLEASE MAKE CHECK PAYABLE TO: CANTON SOUTH ATHLETIC DEPARTMENT, MEMO: GIRLS BASKETBALL
SEND REGISTRATION FORM ALONG WITH PAYMENT TO**

ADAM HALL - CANTON SOUTH HIGH SCHOOL - 600 FAIRCREST STREET SE, CANTON, OHIO 44707

-OR-

TURN INTO MIDDLE SCHOOL OR ELEMENTARY OFFICE

PRE-REGISTRATION DEADLINE...MAY 26TH, 2023