

RIVER MILL ACADEMY



BASKETBALL CAMP

**RMA STUDENTS
IN 3RD THROUGH 8TH GRADE**



**WHERE:
RIVER MILL ACADEMY GYM**



**WHEN:
JUNE 22ND THROUGH 25TH**



**TIME:
8:30AM - 12:00PM**



**WHO:
RMA STUDENTS
IN 3RD THROUGH 8TH GRADE**



**COST:
\$100 FOR ALL
FOUR DAYS**

**SIBLING:
\$80 FOR ALL
FOUR DAYS**



QUESTIONS?

Email:

eric_pickard@abss.k12.nc.us

**LEAD BY
HEAD VARSITY COACH
AND PLAYERS**



3rd THROUGH 5th GRADE:
Must provide a paper copy
of a medical physical.

6th THROUGH 8th GRADE:
Must be registered in Dragonfly Max
and have an uploaded and approved
NCHSAA medical physical.

REGISTRATION FORM

STUDENT NAME: _____ GRADE (NEXT SCHOOL YEAR): _____

PARENT/GUARDIAN NAME: _____

EMAIL: _____ PHONE: _____

EMERGENCY CONTACT: _____ PHONE: _____

ALLERGIES/MEDICAL INFO: _____

I hereby give permission for my child to participate in the River Mill Academy Basketball Camp. I understand that neither the camp staff nor River Mill Academy is responsible for any accident or injury that may occur.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

MAKE CHECKS PAYABLE TO:

**RIVER MILL ACADEMY
ATHLETICS
ATTN: VARSITY BOY'S
BASKETBALL**



REGISTRATION DEADLINE: JUNE 22ND



TURN IN REGISTRATION FORMS AND CASH/CHECK MADE PAYABLE TO
RIVER MILL ACADEMY ATHLETICS AT SIGN IN ON 6/22
FROM 8:00AM - 8:30AM.