



Day Camp: May 29th- June 1st
Location: Nathanael Greene Academy
Cost: \$40- 1st Child
\$5.00 off per additional child
9:00am-12:00pm (Rising 1st-5th Grade)
1:00pm-4:00pm (Rising 6th-12th Grade)

Name _____ Male/Female _____

Address _____

City _____ State _____ Zip _____

Date of Birth _____ Grade Entering 9/18 _____ School Entering 9/18 _____

T-Shirt Size _____ Adult or Child E-Mail Address _____

Camp Release Form:

Being the natural parent/legal guardian of the above-mentioned camper(s), I do consent to his/her participation in the Derrick Williams Basketball Camps. I know of no medical reason prohibiting my child from participating in the 2018 Derrick Williams Basketball Camps. I am aware that any exercise program, even moderate supervised exercise, bears some risk to the participant's health.

I further agree that if he/she does suffer any injury, then the Derrick Williams Basketball Camp, Inc, and Nathanael Greene Academy, through its employees, independent contractors, or agents, have my permission to sign any consent forms required to perform any necessary emergency medical treatment.

I have made my child aware that physical activity will be occurring at the Derrick Williams Basketball Camp and that under no circumstances should they be exercising or playing if they feel light headed, or sick in any way, or have developed a cramp or injury. They will notify the staff of any allergies, sickness, or injury preventing them from continuing and subsequently rest.

I understand that the camp hours outlined in brochure and/or webpage are subject to change. I bear the responsibility of transporting my child to and from camp and I also understand that camp is not responsible for my child outside of camp hours. Furthermore, the camp accepts absolutely no responsibility for making sure an appropriate party picks up my child.

I hereby release Derrick Williams Basketball Camps Inc, or employees, agents or independent contractors of any liability and /or negligence claims resulting from my child's participation in the Derrick Williams Basketball Camps.

Parent/Legal Guardian Signature

Date

Home Phone # _____ Emergency phone # _____

In order to reserve a spot, please send payment to:

Derrick Williams Basketball

Forms may be mailed in also to:

Nathanael Greene Academy
Attn: Derrick Williams
4731 Highway 15 South
Siloam, GA 30665