



# LADY WARRIOR BASKETBALL CAMP



**MON. JUNE 29<sup>th</sup> - THURS. JULY 2<sup>nd</sup>**

## MORNING SESSIONS

<p><b>#1</b> Next Year's 1<sup>st</sup>- 3<sup>rd</sup> Graders 8:30 AM - 11:30 AM South Grand Prairie H. S. 301 Warrior Trail, Grand Prairie, TX 75052</p>	<p><b>#2</b> Next Year's 4<sup>th</sup> - 6<sup>th</sup> Graders 8:30 AM - 11:30 AM South Grand Prairie H. S. 301 Warrior Trail, Grand Prairie, TX 75052</p>
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## AFTERNOON SESSION

<p><b>#3</b> Next Year's 7<sup>th</sup> - 9<sup>th</sup> Graders 12:30 PM - 3:30 PM South Grand Prairie H. S. 301 Warrior Trail, Grand Prairie, TX 75052</p>
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**FEES:** \$60.00 if registered by June 15<sup>th</sup>, \$65.00 after June 15<sup>th</sup>  
**CAMPER'S NEEDS:** Water, Court Shoes, T-shirt  
**STAFF:** South Grand Prairie High School Coaches and Area Coaches/Players  
**EACH CAMPER WILL RECEIVE A CAMP T-SHIRT.**

**NAME:** \_\_\_\_\_ **AGE:** \_\_\_\_\_ **NEXT YEAR'S GRADE:** \_\_\_\_\_

**HOME ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**PARENT'S NAME:** \_\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**HOME #:** \_\_\_\_\_ **CELL #:** \_\_\_\_\_ **WORK #:** \_\_\_\_\_

**NEXT YEAR'S SCHOOL:** \_\_\_\_\_

**CIRCLE SESSION:** MORNING #1 OR #2 AFTERNOON #3

**T-SHIRT SIZE:** YOUTH S OR M~~~ADULT S M L XL MAIL EARLY TO INSURE CORRECT T-SHIRT SIZE

### WAIVER CLAIM

I as a parent or guardian, hereby give permission for my child to participate in the Lady Warrior Basketball Camp and acknowledge the fact that she is physically able to participate in camp activities. I hereby authorize the directors of the Lady Warrior Basketball Camp to act for me in any emergency requiring medical attention, and acknowledge that I will be responsible for any cost (through family medical insurance or otherwise) incurred due to sickness or injury to my daughter. I hereby waive any claim that I might have against the Lady Warrior Basketball camp and the institution providing the facilities.

**SIGNATURE OF PARENT OR GUARDIAN:** \_\_\_\_\_

**PRINTED NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**MAKE CHECK PAYABLE TO:** Dawn Mailloux-Smith **PHONE:** (817) 271-2648  
**MAIL CHECK AND APPLICATION TO:** Dawn Mailloux-Smith 3512 Panorama Ln. Grand Prairie, TX 75052