



2019 Basketball Camp Registration Form

Mail This Form and Payment to: 12545 Fee Fee Road, St. Louis MO 63146

Youth Basketball Camps for Boys and Girls Ages 6-14

Complete **ALL** information. **PRINT** clearly. Only one child per form

T-Shirt Size (Circle One)		
Youth S	Youth M	Adult S
Adult M	Adult L	Adult XL
(If not selected, a Large will be given.)		

Camper's Last Name: _____ First Name: _____ MI: _____

Street: _____ City: _____ State: _____ Zip: _____

Date of Birth: ____/____/____ Age: _____ Male female Grade 2019-10: _____

School: _____ How did you hear about us? _____

Home Phone: (____) _____-_____ Emergency Phone (Different from Home): (____) _____-_____

Parent/Guardian 1 Name: _____ Cell Phone: (____) _____-_____

Can we text? Yes No Email: _____@_____

Parent/Guardian 2 Name: _____ Cell Phone: (____) _____-_____

Can we text? Yes No Email: _____@_____

<input type="checkbox"/>	Spring Break Camp March 18-22	Boys and Girls Ages 6-14 Grade 1-8	AM Session: 8:30-11:30am PM Session 12:30-3:30pm	\$90 for one session \$150 for both sessions
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Summer Camp Week 1
May 27-31
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 2
June 3-7 (**Location TBD**)
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 3
June 10-14
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 4
June 17-21
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 5
June 27-28
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 6
July 8-12
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 7
July 15-19
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 8
July 22-26
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 9
July 29-Aug 2
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Summer Camp Week 10
Aug 5-9
Co-ed Half Day Technical Training
AM Session: 8:30 am - 11:30 pm
PM Session: 12:30 pm - 3:30 pm
\$90 for one session / \$150 for both

Selected Camp Week # _____

AM Session Child Care after camp from 3:30-5:00pm

PM Session **\$10 per day x _____ Days**

Full Day

\$ _____ **Check Enclosed**

All camps will be held at the Barat Academy School Gym - 17815 Wild Horse Creek Rd, Chesterfield, MO 63005. A \$50 non-refundable fee is charged for a cancelled reservation. Payment is due with registration in order to reserve your child's position. Bringing Your Team? Ask about special camp pricing for teams / groups of 5 or more. Make checks payable to: St. Louis Basketball Academy and mail payment and registration form to: St. Louis Basketball Academy, 12545 Fee Fee Road, St. Louis MO 63146 Confirmation will be sent via email when registration form and payment is received.

Health Care and Assumption of Responsibility

Medical Coverage: _____

Policy#: _____

Primary Care Doctor: _____

Phone#: (____) _____-

Does student have any medical/health-related situations? (Please describe any conditions or issues that we should be aware of, for example: seizures, diabetic condition, allergic to bee stings, allergies, *special needs child, *disabilities, *behavior issues, *food allergies, etc.) No Yes If yes, please explain:

**For any special needs, disabilities, or behavior issues, please contact Admissions Office at least 3 weeks before the first Basketball Camp*

Please list any medications student is taking (even if off them temporarily and why).

Medication: _____ Reason for Medication: _____

Medication: _____ Reason for Medication: _____

In the event of an emergency, please list an alternate emergency contact/pick up person that can pick up your child: Name:

_____ Daytime Phone: (____) _____- Cell Phone: (____) _____-

In signing this form, I understand that the information will be used only in case of a medical emergency and to disclose to Basketball Camp staff anything that may affect my child's health, participation in Basketball Camp activities, or behavior while attending. I understand that Fulton-Montgomery Community College (FM) does not carry any medical insurance for FM Basketball Camp program participants. In allowing my child to participate in this program, I recognize my responsibility, through appropriate insurance or otherwise, to cover all medically-related expenses if such circumstance should arise. I understand that in case of a medical emergency, FM staff will contact me through one of the phone numbers previously given. In the event that I (parent/guardian) or the other emergency contact cannot be reached at the numbers listed, I grant permission to FM to arrange for transportation to a hospital and for medical services to be rendered. I understand and agree that not disclosing relevant information regarding any known behavior or health issues will be grounds for the child's immediate dismissal from the program without a refund.

I grant permission for STLBBALL to photograph my child during the STLBBALL Basketball Camp and to use these photos to promote STLBBALL activities and programs.

Parent/Guardian Signature: _____ Date: _____

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**Programs fill quickly on a first come, first served basis. We will contact you if your selected Basketball Camp(s) is full. Mail or deliver completed form with payment to:
St. Louis Basketball Academy c/o Admissions Office, 12545 Fee Fee Road, St. Louis MO 63146**

A confirmation will be mailed to all participants.

Half Day: \$90 per week

Full Day: \$150 per week

STLBBALL Basketball Camp Parent/Student Information

PARENTS—Please read all information carefully. Completed registration form and payment must be submitted to participate.

REQUIRED FOR YOUR STUDENT TO PARTICIPATE!

Drop Off: Students are to be dropped off at Barat Academy Gym. Please have your student here by 8:15AM. Early drop-off begins at 8:00AM, camp begins at 8:30AM. For an afternoon camp only drop-off is at 12:00PM (no earlier than noon please). It is suggested that students bring a book or something to keep them occupied while they wait for class.

Students are expected to be well-behaved at all times. Please accurately complete the health form to inform us of any issues. If a child's behavior creates any disruption for any reason, the parent will be contacted to remove him/her immediately and the child may not be allowed back into the program. No refunds will be given.

Parents/guardians are welcome to meet instructors at Barat Academy Gym on the first day during the 10 minutes prior to the start of camp.

Full Day Basketball Camp will have an optional purchase daily lunch break from 11:30am-12:30pm. **Students will need to bring their own lunch or purchase a lunch.** We suggest students bring drinks and/or snacks to be consumed at a break. Snacks will be available for purchase.

Every camper who registers two weeks before camp start date will receive a t-shirt. Late registrants will not be guaranteed a t-shirt.

If an emergency arises which will delay you picking up your son or daughter on time, please call the following numbers. (314) 769-2255 Director of Basketball Camp Program – Dennis Beckett

For the safety of your child, no student will be released to anyone except a parent or guardian unless the student brings a signed and detailed note from the parent or guardian telling us otherwise.

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Example: "(Date) Johnny Smith's grandfather, Robert Smith, will be picking up Johnny on Tuesday, July 16 from Basketball Summer Camp. – Rebecca Smith"

Please make sure your child knows who will be picking him/her up each day. Children must visually identify whoever is picking them up before we release them.

If an emergency arises, please call us at the above numbers listed under "."

If a parent/guardian has not shown after the class ends, the instructor will keep the student and charge \$10 per day (from 3:30-5pm) for after camp child care fee. We understand emergencies arise, but lateness more than once may result in your child being dismissed from the program.

DO NOT ASK YOUR CHILD TO MEET YOU AT A DIFFERENT TIME OR LOCATION.

Refunds:

A refund for Spring Break or Summer Camp will be considered only in extreme and unforeseeable circumstances. A \$50 non-refundable fee is charged for a cancelled reservation. If a student is removed from Basketball Camp due to behavioral issues, no refund will be issued. Processing time to receive a refund is 10 business days. To request a refund please contact the Admissions office at Karin.markwell@stlball.com

you :

St. Louis Basketball Academy

c/o Admissions Office

12545 Fee Fee Rd

St. Louis, MO 63146

Phone: 314-769-2255

www.stlball.com