

Dick Baumgartner's Basketball Shooting Camp

GIRLS 2010 Camp Enrollment Application

Camper's Name: _____
First Last

Address: _____

City / State / Zip Code: _____

Home Phone: _____ Other Phone: _____

Email: _____ Date: _____

Age: ____ Height: ____ Weight: ____ School: _____

Grade going into: ____ Coaches Name: _____

Did you attend last year: ____ Roommate Preference: _____

CAMP DATES

Please check the session preferred:

___ July 11-14

___ July 18-21

2nd Choice: _____
 (if any)

PARENT or GUARDIAN CONSENT

- Your deposit will be refunded if the camp is filled at the time we receive your application, otherwise the deposit is non-refundable. All cancellations must be in writing with no exceptions.
- I give the Dick Baumgartner Basketball Camp the right to videotape or photograph my child while at camp for publication in camp website.
- I hereby grant permission to the basketball camp to have my child treated by a physician, if necessary. My child is physically fit according to our family physician.

(Parent or Guardian Signature)

➡ CHECK OFF ALL AREAS OF THE APPLICATION THAT APPLY.

PAYING WITH MONEY ORDER OR CHECK (\$10 discount)

Discounted Prices

- Full Payment for overnight camper **\$445**
- Full Payment for day camper **\$385**
(no lodging but all meals included)
- Deposit for overnight camper **\$100**
- Deposit for day camper **\$100**

If sending in deposit, the balance can be sent by mail 2 weeks before camp starts

If you pay balance the day you enroll, it is by MONEY ORDER. Money Order is to be made payable to Dick Baumgartner.

PAYING WITH CREDIT CARD

- Full Payment for overnight camper **\$455**
- Full Payment for day camper **\$395**
(no lodging but all meals included)
- Deposit for overnight camper **\$100**
- Deposit for day camper **\$100**

Method of Payment: ___ Visa ___ Mastercard

Credit Card #: _____

Expiration Date: (mm/year) _____ CCV#: _____

Full Name on Credit Card: _____

Billing Address: _____

City: _____ State/Zip: _____

The balance owed must be paid 2 weeks before camp starts.

Please charge the remainder of my camp fee to my credit card 2 weeks before camp starts if I have not paid the balance by that date. **Please check box.**

Send in your completed application to address listed or fax it to 765-966-5306.

MAIL APPLICATION TO:

Dick Baumgartner's Basketball Shooting Camp
 549 Meadowbrook Road
 Richmond, Indiana 47374
 Phone: (765) 939-2500
 (765) 966-4994
 Fax: (765) 966-5306

*Please enclose a stamped, self-addressed envelope for return confirmation.

Please return this entire form.