

Bethel University

Girls Basketball Camp



Date: June 13 – 16 Time: 9:30AM – 3:00PM

> Ages: 8 – 13 Cost: \$180

CHECK-IN: 8:30 - 9:25AM on First Day (Main Lobby of Wiekamp Athletic Center)

| Name: | | |] | Home Pho | ne: | | Parent Cell: | |
|-------------------------------------|-----------|--------------------|-----------|-----------|---------------|------------|----------------------|----------------------|
| | | | | | | | | Zip: |
| Age (during c | amp): | Bi | rthdate | e: | He | ight: | Weight: _ | |
| School: | | | | Grade Cor | npleted: | Paren | nt Email: | |
| | | | | - 4 | | | | |
| Γ-shirt size: | Yout | h- | S(6-8) | | M(10-12) | L(14-1) | 16) | |
| | Adult | t- | S | M | L XL | XXL | | |
| | | | | | | | | |
| As a parent | /legal g | uardian of | the al | bove nan | ned campe | r, I agree | to waive all li | ability of the |
| Bethel Univ | versity S | Sports Car | nps, B | ethel Ur | niversity, it | s staff ar | nd physicians f | for any accident, |
| | | • | - | | • | | | while traveling |
| | | | - | _ | | | | ecognize that the |
| | | ~ | | | | - | - | · · |
| | | 0 | | • | | | | al to the overall |
| good of the | camp. | l give pern | nissior | ı for my | child's pict | ure to be | e used in Bethe | el publications o |
| videos. | | 1111 | • | | | | | |
| | | | | | | | | |
| Name of pa | rent/gu | ardian: | | | | | | |
| Signature: _ | _ | | | | Date: | | | |
| oignature. | | | | | Date | | | |
| □ Camı | p Fee(s) | | | \$ | | To Reg | gister: Complete thi | s form and send |
| | | application | | \$ | | _ | neck payable to Be | |
| (Must pay \$75 deposit – or full an | | | | | | | OR register online | - |
| | | | | \$16 | | | BUPilots.com/C | |
| □ Order Individual I | | ual Picture | | \$10 | | | Sports Application | - |
| | | | | | | | | asis. Deposit amount |
| 1001 Be | | | | | | | efundable. | - |
| | | 1001 Bethel Circle | | | | | | |
| | | Mishawak | ca, IN 46 | 5545-5591 | | | | |

Camp Details

- ✓ Basketball Fundamental instruction from Bethel WBB Coaching staff and players
- ✓ Basketball games and competitions
- ✓ Snacks and drinks available for purchase throughout day
- ✓ Campus tour led by current Bethel players
- ✓ Bring own lunch
- ✓ Bring clean indoor athletic shoes to change into upon arrival for when on the court

| Assumption of | Rick and | Ralanca | Waizzar |
|---------------|------------|-----------|---------|
| Assumbtion of | i nisk and | i neiease | waivei |

By signing the Assumption of Risk and Release, the individual named below wishes to participate and attend 2022 BETHEL UNIVERSITY SUMMER SPORTS CAMPS and recognizes that there are risks of damage or injury during camp and other activities that may be associated with participation and attendance.

| SELECTED SUMMER CAMP: | |
|-----------------------|-----------|
| START DATE: | END DATE: |

By signing below, the participating individual voluntarily agrees to assume and/or incurs all risks of loss, impairment, damage or injury of whatever kind, including death, that may be sustained or suffered by participating in and attending camp whether or not the result in whole or in part of acts or omissions, negligence, or other unintentional fault of the camp or Bethel University. In addition, the participant, (including his/her heirs, assigns and personal representatives) agrees to release, hold harmless, and indemnify Bethel University from and against any claims, demands, actions, causes of action, lawsuits, expenses, or losses (including attorney's fees) on account of property damage or personal injury (including death) arising out of or attributable to the individual's participating in and attending camp.

This Assumption of Risk and Release Waiver applies to Bethel University and all it's trustees, officers, directors, managers, servants, agents, faculty, staff, students, volunteers, employees, advisors, and/or representatives.

The undersigning acknowledges that he/she has read and understands this document.

| Executed as of: Day of Week: | , Date (Month, Day, Year): | |
|----------------------------------|----------------------------|--|
| Participant's Name: | | |
| Address: | | |
| Participant's Signature: | | |
| Signature of Parent or Guardian: | | |