

Release:

I understand the possibility/risk of injury involved in basketball or any other athletic activity and will not hold any clinic staff responsible for them.

Parent/Guardian Signature: Date

Below please circle which session(s) your daughter would like to attend.

**Session:
7/20-7/24
Girls Grades 5-9
1:00-4:00**

In order to register and ensure a clinic spot, please detach this panel and send with a deposit of \$25.00 payable to:

**Tim Messier
c/o Lamoille Union High School
736 VT 15 West
Hyde Park, VT 05655**

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**The
Third Annual**



***Respect
The Game!***

**Girls
Basketball Clinic
Summer 2009**

**Held at Lamoille Union
Middle/High Gymnasiums**

**Contact: Coach Tim Messier
(802) 851-1333
tmessier@luhs18.org
General Information**

Clinic Cost: \$85.00

Director's Letter

Players and Parents,

As a result of past summer's successful clinics and numerous inquiries and requests, I am pleased to announce the dates and times for this summer's "Respect The Game" Basketball Clinics.

This local and affordable clinic will continue to place a major emphasis on individual skill attainment in an environment where positively, sportsmanship and team play are stressed. Athletes will learn how to make themselves and their future teams better.

It is my sincere hope that as many basketball enthusiasts of all ages take advantage of this wonderful opportunity to share their mutual "respect" for the game with other area players, coaches and speakers. Several past and present Lancers, Lady Lancers and Coaches will be assisting during both sessions.

RESPECT-THE-GAME!

Sincerely,

**Tim Messier
Coach, A.D. and Camp Director**

Registration Application:

Name: _____

Age: _____

Address: _____

City: _____

State: _____

Zip: _____

School: _____

Free t-shirt size: S M L
XL XXL
(Adult Sizes)

Parent/Guardian Signature

Date: ____/____/____

Emergency Contact(s):
Name: _____

Phone Number:
(____) _____ - _____

Insurance Information:

Company: _____

Group/I.D. # _____

Enrollment: Limit of 25 athletes in order to ensure a quality clinic experience, camp enrollment will be filled on a first come, first serve basis, based on application and deposit receipt.

Deposit: A \$25.00 deposit will reserve a clinic spot. Registrants above the 25 will be wait-listed. Deposits will be refundable until July 13th and will be distributed if the clinic is full or cancelled due to insufficient numbers.

Date:
July 20th -July 24th
Grades 5-9 from 1:00-4:00

Confirmation of clinic registration will be made by phone.