

2019 Black & Gold Summer Basketball Camp

	CAMP 1 (JULY 8-12)	CAMP 2 (JULY 22-26)
DATE/TIME	Session 1 9:00-11:00 Session 2 12:00-2:00	Session 3 9:00-11:00 Session 4 12:00-2:00
GRADES (2019-20)	3-9	3-8
COST	\$100 per session \$185 both sessions ●Please add a late fee of \$10 if registering after June 7th	\$100 per session \$185 both sessions ●Please add a late fee of \$10 if registering after June 7 th
ALL CAMPS WILL BE HELD AT LAFAYETTE HIGH SCHOOL		

*Camps will be directed by Lafayette Head Basketball Coach Matt Landwehr and members of the LHS staff

**For more information about camps or Lafayette Lancers basketball please visit www.lafayettehoops.com

***For boys attending both sessions daily we will have lunch available for your son to buy at camp

Registration: Please complete the registration form below and return it with payment. **Please make checks payable to: SJM Resources, LLC** and mail to:

Matt Landwehr
18136 Bent Ridge Drive
Wildwood, MO 63038

Any questions, please contact Head Coach Matt Landwehr at landwehrmatthew@rsdmo.org

Camp is not sponsored by the Rockwood School District.

Please detach along line. Keep top portion for your records and return bottom portion.

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Name _____ Parent's Name _____

Address _____ City/Zip _____

Phone _____ Grade (2019-20) _____ Last School Attended _____

E-Mail _____

T-Shirt Size – **Please Circle (Adult Sizes)** (S - M - L - XL - XXL)

Please Check Each Session Attending:

Session 1 (7/8-12 AM) _____ Session 2 (7/8-12 PM) _____ Both Sessions _____

Session 3 (7/22-26 AM) _____ Session 4 (7/22-26 PM) _____ Both Sessions _____

Total \$ Enclosed	
Cash	
Check #	

Release and Indemnity agreement and medical authorization:

I/We being the parents and/or Legal Guardian of _____
authorize SJM Resources LLC and its employees and agents permission to request emergency medical treatment or care as necessary to insure the well-being of our/my son. Further, I claim that our/my son is found fit for all physical endeavors and has had a valid physical in the past year as well as being covered by valid medical insurance. I have also read the MSHSAA materials on concussions, which includes information on the definition of a concussion, symptoms of a concussion, what to do if you have a concussion, and how to prevent a concussion. I hereby release SJM Resources LLC and all its employees and agents from all claims on account of any injuries which may be sustained by our/my son while participating in the Basketball Camp and any future claims hereafter presented by our/my son as a result of any such injuries.

Parent's Signature _____ Date _____