

St. Ursula Academy Basketball 2009-2010

Clinic At St. Ursula Academy

**June 9, 10 & 11
2009
Grades 6, 7, 8 and 9
From 6PM to 8PM**

This clinic is for all 6th, 7th, 8th and 9th grade players who wants to learn how to play basketball and/or to improve their skill level.

All participants will receive a t-shirt and a customized SUA championship basketball.

Cost-\$85

Please check appropriate box and complete form. Mail entire form with check for the appropriate amount payable to **St. Ursula Academy**, 1339 E. McMillan St., Cinti., OH 45206. Attention: Mike Sipes.

Deadline - May 18, 2009. If you have any questions call Tim Ballinger at 243-4200.

Basketball Clinic

Clinic Registration - Camp Session Grades 6, 7, 8 and 9
\$85.00

Name _____ Age _____ Grade (Aug., 2009) _____

Address _____
street city state zip

Phone _____ Cell Phone _____ Current School _____

Doctor _____ Phone _____ Preferred Hospital _____

List any medical concerns St. Ursula should be aware of _____

Person to contact in case of an emergency:

Name _____ Relationship _____ Phone _____

Best Position _____ Years Experience _____

Club Team _____ Club Experience _____

Height _____ Adult T-Shirt Size S M L XL

Parent's Signature _____

Release of Legal Guardian on Behalf of Minor

St. Ursula Academy Basketball Clinic

The undersigned, on behalf of _____ a minor whose birthday is _____, 19_____, and for whom the undersigned is the natural or legal guardian, hereby releases St. Ursula Academy, its trustees, officers, administrators employees and agents, from any and all liability of whatever nature relating to or in any manner arising out of the use by such minor of the St. Ursula Academy's program(s) and/or facilities. Furthermore, the undersigned agrees to indemnify and hold harmless St. Ursula Academy, its trustees, officers, administrators employees and agents, from any and all damages, expenses or other losses arising from or in connection with any suit, or other legal proceedings or otherwise, including attorneys' fees with respect to the use of St. Ursula Academy's program(s) and/or facilities or any part of them by the minor named above. This release and indemnification shall be binding upon the personal representatives, heirs and assigns of the undersigned and of the minor named above.

I acknowledge that I have full power of authority to sign this document on behalf of the above minor, that I have read the foregoing paragraph, that I understand it, and that I have the option to have it reviewed by legal counsel prior to signing, and that I freely execute this document on behalf of the above minor.

Signature of Parent/Guardian

Date

Print Name