



JUNE 11-14

WARRIOR

WOMEN'S

BASKETBALL

CAMP

How to register:

- 1. Complete the form on the reverse side.**
- 2. Make check payable to:**
Chris James
2205 Forest Drive SE
Cedar Rapids, IA 52403
- 3. Drop off in the Washington Activities Office or mail to the address above.**

This is a private camp not sponsored by the Cedar Rapids Community School District

WASHINGTON

HIGH SCHOOL

NEW GYM

Grades 3 – 7

1:00 – 3:00 PM

Grades 8 – 12

10:00 AM – NOON

Fundamentals
Skill Improvement

Agility & Speed

Team plays

Coaches

Washington High
School staff

Junior Warrior
Coaches

Warrior
Hall-of-famers

COACH JAMES

(319) 350-9350

Chrisjames231@gmail.com



Warrior Women's Basketball Camp Application

Check the session: (Fall '18 grade)

\$40 _____	Grade 3 – 7	1:00-3:00pm	June 11-14
\$40 _____	Grade 8 – 12	10:00-Noon	June 11-14

Total \$ _____

Circle T-shirt size:

Youth: S M L Adult: S M L XL XXL XXXL

Name: _____

Address: _____

Phone #: _____ Fall '18 Grade: _____

E-Mail: _____

School: _____

Parents' (Guardians) Name: _____

Parents' Work/Cell Phone #: _____

Waiver by parent or guardian: In case of emergency I hereby authorize the staff of the Warrior Women's Basketball Camp act for me according to their best judgement in any emergency requiring medical attention. I hereby waiver and release the camp from any and all liability for any injuries or illnesses incurred while at camp. I have no knowledge of any physical impairment that would be affected by the above named camper's participation in the camp program as outlined in this brochure. No medical coverage is afforded for injuries while at the Warrior Women's Basketball Camp.

Parent/Guardian Signature _____ Date _____