

# Bulldogs



## Basketball Camp

For more information call:

Coach Hauser 406.570.0685



**June 23-26**  
Butte High

**Boys** 2<sup>nd</sup>-4<sup>th</sup> 9:00am-10:30am  
5<sup>th</sup>-8<sup>th</sup> 11:00am-1:00pm  
9<sup>th</sup>-12<sup>th</sup> 2:00pm-4:30pm

Family rate: 2<sup>nd</sup>-4<sup>th</sup>Grade \$50, 2 kid \$75  
1 kid: \$75.00  
2 kid: \$95.00  
3+: \$110.00

**Fee includes t-shirt**

Please return form & money by June 9<sup>th</sup>

Send to: 1917 Carolina Ave Butte MT, 59701

Checks payable to: Bulldog Basketball

Registration Form

Campers Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Emergency Contact & phone: \_\_\_\_\_

Grade entering next fall: \_\_\_\_\_

T-shirt size: Youth \_\_\_\_\_ Adult \_\_\_\_\_

Check: \_\_\_\_\_ Cash: \_\_\_\_\_

I am the legal parent/guardian of the named camper, who is a candidate to participate at the BULLDOG BASKETBALL CAMP. I recognize that there are risks associated with participation in the camp activities. I agree to assume all/any risks and responsibilities of my son's participation in the camp. I agree not to hold the camp directors or coaching staff responsible in the event of an accident including but not limited to an injury. I hereby authorize the EMT or Certified Athletic Trainer on staff to administer emergency treatment in the event of an accident or injury. Each camper is to be covered by their own insurance.

Parent/Guardian Signature: \_\_\_\_\_