

OLD LYME PARKS AND RECREATION  
**WILDCAT BASKETBALL CAMP**  
2014 REGISTRATION FORM

PLEASE FILL OUT A FORM FOR EACH PARTICIPANT

PARTICIPANT'S NAME \_\_\_\_\_

2014-2015 GRADE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_ SEX (M) \_\_\_\_\_ (F) \_\_\_\_\_

NAME OF PARENT/ GUARDIAN \_\_\_\_\_

ADDRESS \_\_\_\_\_

**CONTACT NUMBERS / INFORMATION**

HOME \_\_\_\_\_ WORK \_\_\_\_\_ OTHER \_\_\_\_\_

EMAIL \_\_\_\_\_

**RELEVANT MEDICAL INFORMATION**

\_\_\_\_\_  
\_\_\_\_\_

I HEREBY GIVE MY CONSENT TO ALLOW MY CHILD TO PARTICIPATE IN THE PARKS AND RECREATION PROGRAM LISTED ABOVE AND GIVE PERMISSION FOR ALL PARKS AND RECREATION EMPLOYEES TO ACT AS NEEDED IN CASE OF EMERGENCIES. BY SIGNING THIS FORM I UNDERSTAND THAT I ASSUME ALL RESPONSIBILITY FOR ANY INJURIES INCURRED.

SIGNATURE OF PARENT/ GUARDIAN \_\_\_\_\_

**CAMP HELD AT THE LYME/OLD LYME MIDDLE SCHOOL GYM**

\_\_\_\_\_ BOYS GRADES 3-7 JULY 21-25 9:00 AM-1:00 PM  
FEE \$90 / EACH ADDITIONAL SIBLING \$80

**MAKE CHECKS PAYABLE TO OLD LYME PARKS AND RECREATION**

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TO BE COMPLETED BY PARKS AND RECREATION  
AMOUNT PAID \_\_\_\_\_ CHECK # \_\_\_\_\_ CASH \_\_\_\_\_