

**office use only**  
 contact for team: \_\_\_\_\_  
 E-mail: \_\_\_\_\_  
 phone: \_\_\_\_\_



**office use only**  
 MRF \_\_\_\_\_  
 room \_\_\_\_\_  
 credit card \_\_\_\_\_  
 E-mail \_\_\_\_\_

**INFLUENCING THE NEXT GENERATION**

**Higher Level Camps  
 Going back to the Basics Fundamentals Camp  
 GIRLS: entering 5 - 12 grade fall of 2012**

**Who:** Girls: 5 – 12 grade  
**What:** Basketball Camp  
**When:** June 10 - 17, 2012

**Where:** Wayland Academy, Beaver Dam, WI

**Cost:** **\$375**

**PERSONAL INFORMATION**

Name: \_\_\_\_\_ Female \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_ Work #: \_\_\_\_\_  
 Parents Name: \_\_\_\_\_ Cell #: \_\_\_\_\_  
 Birth date: \_\_\_\_\_ Grade: \_\_\_\_\_ (based on 2012 – 13 academic year)

**ROSTER INFORMATION**

Position: \_\_\_\_\_ Height: \_\_\_\_\_ Interested in Summer Program: \_\_\_\_\_  
 Jersey: S M L XL XXL Experience Playing: \_\_\_\_\_ AAU Teams  
 (unisex sizes) (check those that apply) \_\_\_\_\_ Traveling Teams  
 \_\_\_\_\_ Freshman  
 \_\_\_\_\_ JV  
 \_\_\_\_\_ Varsity

**PAYMENT**

1. Check # \_\_\_\_\_ Amount \_\_\_\_\_  
 2. Credit Card visa or Master card \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 (circle one) \_\_\_\_\_ Exp. Date \_\_\_\_\_ (3% service charge)  
 3. On a Higher Level Camps Traveling Team \_\_\_\_\_  
 This is a contract between Higher Level Camps and the responsible paying party. You are under contract to pay in full whether your child attends camp or not. There will be no refunds after you sign up for camp or choose to leave camp early. Refunds given only if you are injured before camp begins and have a doctor's written excuse.

**ROOMMATE**

(must request each other for us to honor your request)

1st choice \_\_\_\_\_ 2nd choice \_\_\_\_\_  
 (If you play for HLC's traveling teams, we will assign you a roommate)

\_\_\_\_\_  
 Parents Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Athletes Signature

**Please return this Registration Form, Medical Release Form and Payment to address listed below.**  
 Cheryl Lynne Mohr . 65 Aurora Lane . Fond du Lac, WI 54935 . (920) 929-9008 . www.higherlevelcamps.com