

return: HLC  
N6963 Lap Rd.  
Mt. Calvary, WI 53057



INFLUENCING THE NEXT GENERATION

<b>Players Name:</b> _____
<b>Boy</b> 12(7 gr.) 13(8 gr.) 14(9 gr.) 15(10 gr.) 16(11 gr.) Elite (12 gr.)
<b>Girl</b> 12(7 gr.) 13(8 gr.) 14(9 gr.) 15(10 gr.) 16(11 gr.) Elite (12 gr.)

### TRAVELING TEAM FEE AGREEMENT FORM

I hereby agree to pay to Higher Level Camps, Inc. the sum of \$ \_\_\_\_\_ / \$200 (uniform fee) based on the payment plan selected below. I understand that due to limited enrollment in this program, I am responsible for payment of the full amount set forth in this agreement, regardless of whether my son/ daughter participates in the traveling team program.

#### I. INJURY

I also understand that if my son/ daughter is injured during the AAU Season I will be required to pay for the program. If HLC finds someone to take my son's or daughter's place for the remainder of the season because my son or daughter cannot return to play due to an injury I will pay on a pro-rate basis. Higher Level Camps reserves the right to require written documentation of the injury and inability to participate from the athletes treating physician.

#### II. INJURED AND RETURN TO PLAY

I further understand that if my son or daughter is injured during the the season and misses a few tournaments and comes back to play, I will be required to pay in full.

#### III. PRACTICE/ GAME ATTENDANCE/ BEHAVIOR

Finally, I understand that the guidelines set forth for attending practices/ games and behavior. If my child does not attend practices, tournaments, or does not reflect HLC's image in a positive way his/her playing time will be adjusted accordingly.

#### IV. ORANGE OR BLUE PACKAGE

My son/ daughter will participate on the following team for HLC's Traveling Teams: (based on grade entering, not birth date)

**circle one:**                    11    12    13    14    15    16    Elite

**cost to play**                    team (\$ \_\_\_\_\_) + uniform (\$200.00) = total \$ \_\_\_\_\_

(fees listed inside traveling teams icon- click on blue bar that reads cost and fees/ uniforms for new players: \$200 fee)

#### V. PAYMENT PLAN/ 2 OPTIONS (3% service fee added to credit card purchases)

<b>A. Pay in full by:</b> (add \$200 from payment in full if you do need a new uniform)	
1. check # _____ Amount \$ _____	
2. CC _____ master card or visa card # _____ / _____ / _____ / _____ exp. date _____	
<b>B. Pay in 3 installments by:</b> (2 options) (add \$200 to total team fee if you do need a new uniform)	
1. down payment of \$700.00 todays date: Check # _____ (must send 2 checks postdated. Registration only accepted with checks enclosed)	Jan. 10, 2010 check # _____ Feb. 10, 2010 check # _____
2. down payment of \$700.00 check # _____ todays date: check # _____ _____ master card or visa card # _____ / _____ / _____ / _____ exp. date _____ (the remaining balance will be put on your credit card the dates listed below)	
10-Jan-10 _____	10-Feb-10 _____

#### VI. PARENT INFORMATION

_____	_____	_____
<b>Parents Nar</b>	<b>Signature</b>	<b>Date</b>
_____	_____	_____
<b>Address</b>	<b>City</b>	<b>State      Zip</b>