



Town of Clay presents: Ryan Blackwell's Liverpool Warriors
Basketball Camp for boys in 3rd – 9th grades
February 21-February 24

Ryan Blackwell's Liverpool Warriors basketball camp is a fun filled and exciting atmosphere where kids will learn the basic fundamentals and skills needed to improve their overall game. There will be several experienced coaches on hand to help coach and develop each player's skills. There will also be competitive games and competitions to enhance each player's learning experience.

- FOR: Boys in 3rd - 9th graders
 WHEN: **Tuesday, February 21 – Friday, February 24, 2017**
 Tues thru Friday - 9:00 am to 3:00 pm **NO MONDAY**
 WHERE: **Liverpool High School Gym**
 COST: \$90.00 for the week. Each player gets a T-shirt
Bring lunches or \$ for Concessions - **pizza, drinks, candy, and chips**

In order to maintain individual attention and involvement, camp size is limited. **To reserve your spot please submit registration form (below) and payment by mail to:**

Please feel free to contact Ryan Blackwell - phone: 561-225-6064 or
 Email: rblackwell@liverpool.k12.ny.us with any questions.

Town of Clay Recreation and Human Resource – Youth Permission Waiver

I understand participation in (name of event) Town of Clay Basketball Program involves rigorous physical activity and risks of physical injury, and we assume these risks. I hereby give consent for emergency transportation and treatment in the event of illness or injury. I hereby accept responsibility for the payment of any emergency transportation or treatment on behalf of the participant. I further certify the participant is in good physical condition, and has no medical or physical conditions that would restrict his/her participation in this event.

(Parent/Guardian signature) _____ on this (Date) _____ does hereby covenant and agree to release and hold harmless the Town of Clay from and against any and all liability, loss, damages, claims, or actions (including costs and attorney fees) for bodily injury and/or property damage, to the extent permissible by law arising out of participation in the (name of event) Town of Clay Basketball Program-during (dates): _____

Pictures and other materials, which include my child, may be used for Town of Clay promotional purposes. There is no medical insurance carried by the Town of Clay for program participants.

Child's Name: _____ GRADE _____ SCHOOL: _____

Date of Birth: _____ Age: _____

Address: _____ Zip _____

Home Phone #: _____ Work Phone #: _____ Pager/Cell #: _____

Medical/Allergy History: _____

Additional Person/Phone # to contact in an emergency: _____

Home Phone #: _____ Emergency Name & Phone #: _____

Please list and Allergies /Medical problems we need to be aware of: _____

Please indicate T-shirt size: YL AS AM AL AXL