

CAMP INFORMATION

LOCATION: Brewster Sports Center
19 Sutton Place
Brewster, NY 10509
Tel: 845-278-2040

DATE: June 25-29, 2012
August 13-17, 2012

AGE: Campers Age 10-16

COST: \$310 per week

HOURS: 9:00am - 4:00pm

LUNCH: Lunch is available to purchase at our Sports Cafe. All campers have a choice of a nutritious hot or cold meal. A variety of desserts, beverages and fruits are available. Lunches will be refrigerated for campers who choose to bring their own.



THINGS TO BRING: A sports bag containing basketball shoes, shorts, towels and at least two t-shirts per day.

CANCELLATION POLICY: Prior to May 1 payments will be refundable in full (minus a \$50 cancellation fee). Cancellations after May 1 are non-refundable.

Photos courtesy of Quintessential Photography

FIVE-STAR SUMMER BASKETBALL CAMP 2012

Campers Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Sex: _____ Birthdate: _____ Age: _____

Email Address: _____

Home Phone: _____

Mother's Name: _____

Cell Phone (Mother): _____

Father's Name: _____

Cell Phone (Father): _____

Cost is \$310 per week. Please check week(s) attending.

_____ June 25-29, 2012 _____ August 13-17, 2012

Method of Payment: please print

_____ Check (enclosed)

_____ Visa _____ MasterCard

_____ AmEx _____ Discover

Credit Card No: _____

Expiration Date: _____

Signature: _____

Make check payable to: Brewster Sports Management,
19 Sutton Place, Brewster, NY 10509

ALL PAYMENTS ARE NONREFUNDABLE.

\$25 returned check fee.

All players are responsible for their own insurance.

Disclaimer: I hereby authorize the staff of the "Brewster Sports Center" to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release "Brewster Sports Center" from any and all liability for any injuries or illnesses incurred while participating at the facility or property. I have no knowledge of any physical impairment that would affect the player's participation, named to the above, in the league or tournament as outlined in the information. I also understand that "Brewster Sports Center" has the right to use, for publicity and advertising purposes, photographs of participants taken at the facility. I understand and accept the camp fees and refund policies.

Signed: _____ Date: _____

Parent or Guardian Signature: _____

Health Plan (Name): _____

Identification #: _____