



The Woodlands Area
GIRLS BASKETBALL CAMP
2022

Dates: MAY 31ST -JUNE 3RD

Location: The Woodlands High School Senior Campus
6101 Research Forest Drive
The Woodlands, TX 77381

CAMP COST

\$150

(Electronic payment available on Venmo @Ashley-Davis-1589)

YOU DO NOT HAVE TO ATTEND A TWHS FEEDER SCHOOL TO COME TO OUR CAMP! ALL STUDENTS ARE WELCOME!

Every camper will receive a

FREE T-SHIRT



Questions Please Email Coach Davis: thewoodlandsareacamp@yahoo.com



The Woodlands Area

Girls Basketball Camp At The Woodlands High School 2022



Camp Info:

May 31st – June 3rd

For all Incoming 5th-9th graders

9am-12pm

\$150.00 Make Checks Payable to: Ashley Davis

Mail to:

The Woodlands Ninth Grade Campus

ATTN: Ashley Davis

10010 Branch Crossing Dr.

Spring, TX 77382

Deadline for Mail-in Registration:

Friday, May 20th

Questions? Please Email Coach Davis: thewoodlandsareacamp@yahoo.com

Late Registration is available on the 1st day of camp at the gym!

Please note that it is an additional \$10 per late camper registration.

Camp T-shirts will go out to all campers: Please select a size below: (circle one)

YOUTH-M

YOUTH-L

ADULT-S

ADULT-M

ADULT-L

ADULT-XL

Registration Form:

Grade Level in Fall 2022: _____

Camper's Name: _____

Parent's Name: _____

Parent's Email address: _____

Parent's Cell#: _____

CISD Camp Waiver:

Student's Name: _____

Activity: Basketball

In order for your child to be able to participate in the 2022 camp activities, it is necessary for you to sign this statement indicating your understanding that the district does not cover insurance covering injuries your child may sustain. By my signature, I am informing CISD that I understand that the district is not responsible for any accident or payments resulting from such an accident. In the event of injury to my child, we recognize that CISD, its board of trustees, its agents, and its employees are in no way liable for injuries, medical expenses, or damage and will have no insurance covering my child without any interference from anyone serving or employed by CISD.

Dated this _____ day of _____ 2022.

Parent Signature: _____

Liability:

In the event of an emergency situation, I hereby authorize The Woodlands HS Basketball Staff to obtain medical attention for my child. I hereby waive and release both the TWHSBC staff and CISD from any liability for the injury and/or illness that might occur while participating in the camp. I understand as an active participant in basketball that an accident or injury may occur.

Parent Signature: _____

Emergency Medical Contact:

Physician's name and number:

Please list any medical condition that we should be aware of: _____

CAN'T WAIT TO SEE YOU THERE!!!