

2011 HOOP CAMP REGISTRATION FORM

Camper's Name: _____

Parent / Guardian's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____

Work/Cell Phone: (_____) _____

E-Mail Address: _____

Camper's DOB: ____ / ____ / ____ Age at time of camp: _____

Male / Female (Circle One)

Camper Jersey Size (Adult Sizes): XS S M L XL

Of Yrs Attended Mavs Hoop Camp (Including 2011): _____

Camp Location: _____

Camp Date: _____

\$235 per camper (\$225 before March 15th)

Checks payable to:

Dallas Mavericks Hoop Camp
2909 Taylor St. ▪ Dallas, TX ▪ 75226

Credit Card Payments: MasterCard Visa AMEX Discover

Account #: _____ Exp. Date: _____

Card Holder's Name (print)

Signature



Billing Address: _____

City: _____ State: _____ Zip: _____

For Questions Call 214-747-MAVS or E-mail hoopcamp@dallasmavs.com