

Please fill out entire application (Por favor llene la aplicacion)

Please print or type

Camper's Name: _____

Address: _____

City: _____

State: _____ Country: _____ Zip: _____

Gender: _____ Grade (Fall 2005) _____ DOB: _____

Parent/Guardian: _____

Home Phone: () _____

Work Phone: () _____

E-mail: _____

Roommate Preference (overnight camp only) _____

How did you hear about the camp? _____

T-shirt Size: Youth M (12) L (14-16)
 Adult S M L XL

Short Size: Youth M (10-12) L (14-16)
 Adult S M L XL

I prefer to attend camp (check one):

SPURS SESSIONS

Ages

<input type="checkbox"/> June 6-10	University of Incarnate Word (full days only)	8-14
<input type="checkbox"/> June 13-17	University of Incarnate Word (full days only)	8-14
<input type="checkbox"/> June 20-24	University of Incarnate Word (full days only)	8-14
<input type="checkbox"/> June 26-July 1	University of Incarnate Word (overnight/boys only)	10-18
<input type="checkbox"/> July 11-15	Factory of Champions (full days only)	14-18
<input type="checkbox"/> July 18-22	St. Mary's Hall (full days only)	8-14
<input type="checkbox"/> August 1-5	University of Incarnate Word (full days only)	8-14

SILVER STARS SESSION

<input type="checkbox"/> July 25-29	St. Mary's Hall (full days, girls only)	8-18
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Form of payment accepted: Cash, Check, or Credit Card

Credit Card: Visa MC AMEX

Cardholder name _____

Credit Card Number _____

Exp. Date _____

Amount _____

Signature _____

- *Please include camper's name and week attending on check*
- *Please include driver's license number on check*

Make checks payable and submit to:

SS&E Basketball Camp

One SBC Center

San Antonio, TX 78219

(Please sign Parental Consent form to complete the application)

2005 Spurs Basketball Parental Consent Form

APPLICATION PROCESS AND REFUND POLICY

Complete and return along with your designated deposit fee. **\$100 (Full-Day session)** or **\$200 (Overnight session)** deposit must accompany each application, and the remaining balance will be due no later than **June 1, 2005**. All money, less a \$50 non-refundable administrative fee, will be returned for all cancellations prior to **June 1, 2005**. There will be no refunds after **June 1, 2005. NO EXCEPTIONS**. More detailed information will be mailed to you following **May 1st** regarding what to bring, arrival times, amount due, etc. If paying by check, your cancelled check will be your receipt. Please note that there will be a **\$30 charge** for all **bounced** checks.

Parental Consent

I certify that my child has been examined by a physician and found to be in good health and able to compete in all camp activities without restriction. (All campers must have a medial exam prior to entering camp. An official health certificate will be sent out to all campers after the Spurs/Silver Stars receive the initial deposit and enrollment forms. This certificate must be completed and on file before camp participation. ***CAMPER NOT BE ABLE TO PARTICIPATE WITHOUT AN OFFICIAL HEALTH CERTIFICATE.*** The Spurs/Silver Stars Basketball Camp issues Group Accident Insurance for all campers which is included in the cost of the camp.) Furthermore, I hereby authorize the directors of the Spurs/Silver Stars Basketball Camp to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that the Camp Director reserves the right to dismiss any camper whose influence or actions may be detrimental to the best interest of the camp members. I assume all risks associated with my child's participation in the camp, and I hereby release and indemnify the venue hosts for the camp, Spurs/Silver Stars Basketball Camp, the San Antonio Spurs L.L.C., and the National Basketball Association and its Member Teams, NBA Properties, Inc., and each of their respective parent companies, subsidiaries, affiliates, directors, officers, governors, employees, representatives and agents against any and all liability, damages or causes of action, and against any and all claims resulting from any injury or illness my child may sustain while attending camp. I have also read and agreed to the terms of the application process and refund policy. I understand that there are no refunds for any reason after **June 1, 2005. NO EXCEPTIONS.**

Parent's Signature _____

Date _____