



DIVERSECITY HOOPS GIRLS LEADERSHIP BASKETBALL CAMP

STRONGER TEAMMATES. BETTER PLAYERS. THOUGHTFUL CITIZENS.

HOSTED BY WESTERN PENNSYLVANIA SCHOOL FOR THE DEAF

Friday Award Ceremony at noon. Scholarship applications due May 1



Girls Grades 4-9

DATES: July 8- 12

TIME: 9am - 3pm

**PLACE: Western Pennsylvania
School for the Deaf**

FEE: \$80 per attendee

QUESTIONS?

Contact Shannon Finley

E-mail: shannon@teamdiversecity.org

FOR MORE INFO VISIT WWW.TEAMDIVERSECITY.ORG

DIVERSECITY

SUMMER 2019 GIRLS LEADERSHIP BASKETBALL PROGRAM REGISTRATION FORM

*Note: This application can be completed online at www.teamdiversecity.org

Camper Information

First Name _____ Last Name _____
Date of Birth (dd/mm/yyyy) _____
Grade _____ School _____
Parent/Guardian First Name _____ Parent/Guardian Last Name _____
2nd Parent/Guardian First Name _____ 2nd Parent/Guardian Last Name _____
Home Phone (____) _____ Alternative Phone (____) _____
Street Address _____
_____ State _____ Zip Code _____
Parent/Guardian E-Mail Address _____
Camper E-mail Address (Optional) _____

Insurance Information

Please note: We DO NOT provide health and/or medical insurance. Campers must rely on their parent/guardian's medical services. Insurance information must be included on this application. Minor sports injuries will be treated by an on-site athletic trainer. DiverseCity waives all responsibility for treatment of camp related injuries.

Health Insurance Provider _____

Agreement/Plan # _____

Policy # _____

Agreement

I hereby authorize the staff of DiverseCity to act for me in accordance with their best judgment in any emergency requiring medical attention and I hereby waive and release the camp from any and all liability for any injuries or illness incurred while at camp. I have no knowledge of any physical impairment that would be affected by the above named camper's participation in the camp program, as outlined on this website.

DiverseCity Enterprises, Inc. has my permission to use photographs and/or video recordings of my child publicly to promote its programs. I understand that the images and/or video may be used in print publications, online publications, presentations, websites, social media and other similar forms of use. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.

I understand and agree to all terms of the application mentioned above.

Parent/Guardian Signature _____ Date _____

Payment

Camp Fees: \$80 (Scholarships are available)

Camp fees can be paid via PayPal (online application), cash, check, or money order made out to "DiverseCity Inc." and mailed to the following address:

DiverseCity Inc.
503 Malcolm Court
Pittsburgh, PA 15146

***Please let us know if you wish to make a cash or check
payment on the first day of the program**

Please return this form to Shannon Finley at shannon@teamdiversecity.org