Oriole Girl's Basketball



to:

Dan.Devries@k12.sd.us



-	_	—		botto	

Name(please print)	Individual Camp:	\$45
Address	2nd Camper (\$35):	
Telephone Work Phone	Total:	

366-1946

Grade in Fall of 2016

Lennox, SD

Release Form: I hereby authorize the staff of the Lennox Camp to act for me according to their best judgment in any or all emergencies requiring medical attention and hereby release the camp and workers from any and all liability for any injuries incurred while traveling to, participating in, or returning from camp.

Email:

Text:

Parent Signature

Date