



2009 Orange Coast Optimist Basketball Camp



Boys and Girls, 5 - 13 years old

ONE SESSION ONLY Aug.3 through Aug. 7

9:00 a.m. to 3:00 p.m.

(Daycare available at no cost)

Cost:

OCO Members: \$110.00/ Non-Members: \$125.00

each session, includes shirt & ball

Where:

Cypress College *located at* 9200 Valley View St., Cypress, CA 90630

Check one:

Parents: Please complete application and mail it with your **FULL PAYMENT**. Each application must be signed by parent or guardian before it will be accepted. **No refunds will be allowed TWO weeks prior to camp.** Camp applications will be accepted on a first come, first serve basis. **No registration will be accepted at the door.** **REGISTRATION DEADLINE: POSTMARKED BY JUNE 30, 2009.**

There will be absolutely no exceptions!

Ball size and hoop height at camp director's discretion.

Please Print:

Camper's Name _____ Male or Female

Child's Birthdate _____ Last SEYO Level _____

Check if OCO Member

Parent/Guardian:

Name _____

Address _____

City _____ Zip _____

Home Phone (____) _____ Bus. Phone (____) _____

E-mail Address _____

Circle Shirt Size: Youth M Youth L

Adult S M L XL (Xtra Shirt add \$10.00)

Please Circle:

Male or Female

Last SEYO Level

OCO Member

Parent/Guardian:

Name _____

Address _____

City _____ Zip _____

Home Phone (____) _____ Bus. Phone (____) _____

E-mail Address _____

Circle Shirt Size: Youth M Youth L

Adult S M L XL (Xtra Shirt add \$10.00)

No exchanges on shirts sizes can be made.

Please list any medical conditions coaches should be aware of:

Accident/Health Insurance Carrier _____

Policy Number _____

Yes, I will need daycare: (check time)

7:00 to 9:00 am. _____ 3:00 to 5:00 p.m. _____

2009 OCO basketball Camp Registration Form

Make your checks payable to "OCO" & mail with your completed application to:

OCO Basketball Camp

P.O. Box 28802

Santa Ana, CA 92799

I hereby authorize the staff of the Orange Coast Optimist Club's Basketball Camp to act for me according to their best knowledge and I hereby waive and release the Camp, The Orange Coast Optimist Club, it's directors, members and volunteers, Cypress College, North Orange County Community College district (NOCCCD), its officers, agents, employees and volunteers from any and all liabilities for any injuries or illnesses incurred while at Camp. I have no knowledge of any physical impairment that would be affected by the camper's participation in the basketball camp program. I also understand the Camp retains the right to use for publicity and advertising purposes photographs of campers taken at camp.

Parent/Guardian Signature:

Application will be returned if no signature

In case of an Emergency, contact:

Relationship _____

Phone (____) _____ Cell(____) _____

A confirmation letter will be sent to you in mid-July. If you have any questions, please call (714)424-0231 ext. 101 OR email @ email@ocoyouth.org