

Coach Woottens Overnight Basketball Camp

Registration form

(please print)

Camper's name _____ birthdate _____

Dad's name (If Father/Son Camp) _____

t-shirt size (circle one) YL YXL AS AM AL AXL AXXL school _____

Address: _____

City _____ State _____ Zip Code _____

Email _____

Phone _____ phone (cell) _____

Roommate preferred (we have rooms of 2 and rooms of 3...roommate requests must match)

Group name (if applicable) _____

Session (circle your choice(s))

Father/son June 15-16

week #1 June 17-21

week#2 June 23-27

week#3 June 29-July 3 (GIRLS)

week #4 July 8-12

week#5 July 15-19

NOTE: This form must be accompanied by a \$250 deposit. (\$125 for Father/Son Camp) The deposit is fully refundable until April 15. After April 15, the deposit is non-refundable.

We accept Visa and MasterCard. To pay by credit card please fill in the information below:

Name on card _____

Card # _____ / _____ / _____ / _____

Exp date (MMYY) _____ 3 digit CVV code _____

You may fax your completed form to 1(800)591-9766, email it to camp@coachwootten.com or mail it to Coach Woottens Basketball Camp 5009 Patuxent Riding Lane Bowie, MD 20715.

Teaching fundamentals & values to young men and women since 1961