

Summer Camp Slip

Child Name: _____ Age: _____ Hubber: YES NO

Parents Name: _____ Phone: _____

Days Attending: M T W TH F

AllStar 11y - 13y ___ Pro 8y - 10y ___ Rookie 5y - 7y ___

Parent/Guardian Signature: _____

Staff Initials: _____ Date: _____

W1 ___ W2 ___ W3 ___ W4 ___ W5 ___ W6 ___ W7 ___ W8 ___ W9 ___ W10 ___ W11 ___ W12 ___

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