



Monroe Jr./Sr. High School "Home of the Hornets"

220 Yankee Road, Monroe, Ohio 45050 (513) 539-8471

The Monroe Hornet Women's Basketball coaches and players invite girls entering grades Kindergarten through sixth (K-6) to join them for a fun and exciting week of learning and developing fundamental basketball skills. The camp focuses on the fundamental skills including shooting, passing, ball handling, rebounding, defense and offense.

Dates: October 9-11 **Time:** 4:30-6:30pm **Cost:** \$40 (includes camp t-shirt)

Daily Drop-Off and Pick-Up: Monroe High School

Campers attending the elementary school can stay after school. Varsity players will be in the gym and hallways to monitor all campers prior to the camp starting each day.

What to Bring: Water bottle and basketball (both clearly labeled with name)

For more information or questions please check the school website or contact Head Coach Chad Allen at callen@monroelocalschools.com or 513-465-1672

Please detach and send completed form and check to: Monroe High School, Attn: Women's Basketball, 220 Yankee Rd, Monroe Ohio 45050. Make checks payable to: Monroe Athletics or payment can be made online (monroelocalschools.com) using EZ Pay. Cash payments can be dropped off at High School Athletic Office.

Student Name: _____ **Grade :** ____
Address: _____ **City:** _____ **State:** ____ **Zip:** _____
Parent Contact Number: _____
Parent E-mail: _____

Known Allegies / Conditions: _____
T-shirt Size (circle one) Youth S Youth M Youth L Adult S Adult M Adult L

The ("Student") and the undersigned parent(s)/guardian(s) desire to allow Student to participate in a school athletic activity (the "Activity") and understand and acknowledge that participation in the Activity is voluntary. In exchange for being permitted to participate in the Activity, Student and parent(s)/guardian(s) agree to this full Waiver and Release.

Student and parent(s)/guardian(s) understand and acknowledge that there are risks inherent in participating in the Activity, including possible personal injury, injury to property, or death and agree to make themselves aware of the risks and hazards associated with the Activity and acknowledge that the activities involved in the Activity may include (but are not limited to) various types of physical exertion, running, weight lifting, physical contact, collision with other persons, and other conduct involved in athletic activity. Student and parent(s)/guardian(s) acknowledge and understand that there is a possibility of unforeseen and unpredictable events and risks inherent in the Activity that can result in serious bodily injury or death when participating in the Activity. Being fully aware of the risks (known and unknown) and possibility of injury and loss involved, the undersigned Student and parent(s)/guardian(s) consent to have Student participate in the Activity and agree that Monroe Local Schools and its agents (including if present, team doctors, athletic trainers and nurses) may provide treatment to Student for any injury he or she may sustain while participating in the Activity.

Student and parent(s)/guardian(s), on behalf of themselves, Student, executors or other representatives, waive and release all rights and claims for damages that the parent(s)/guardian(s) or Student may have against the Monroe Local Schools (Monroe) and its representatives, agents, (board members, employees, representatives, and volunteers). Student and parent(s)/guardian(s) agree to waive, release and hold harmless Monroe and its agents from any and all present and future claims, lawsuits, actions, liabilities, demands, damages, costs, expenses, loss of services, actions and causes of action whatsoever, known or unknown, anticipated or unanticipated, relating in any way to the activities involved in the Activity.

The undersigned parent(s)/guardian(s) also affirm that Student now has and will continue to maintain proper hospitalization, health, and accident insurance coverage which the undersigned acknowledges as adequate for both Student's and the parent(s)/guardian(s)' own protection. Student and parent(s)/guardian(s) represent and warrant that Student is qualified, in good health, and in proper physical condition based on a licensed physician's recommendation to participate in the Activity and all activities associated with the Activity.

Parent or Guardian Signature _____
Date: ____/____/____