25 <sup>™</sup> Annual GCMS Falcon Boys Basketball Camp								
		Inco	J	2 <sup>nd</sup> -3 <sup>rd</sup> , une 5-9 MS Hig	), <b>201</b> 7	7	ers	
COST:	\$25 pe	r person						
TIMES:	Monday June 5 – Friday June 9 at High School 2 <sup>nd</sup> -3 <sup>rd</sup> Grades 8:00-9:00am 4 <sup>th</sup> -5 <sup>th</sup> Grades 9:00-10:00am							
DEADLINE:	Please make checks payable to GCMS Boys Basketball. Applications and tuition to be mailed/dropped off at the following:							
	GCMS Boys Basketball GCMS High School 815 North Church Gibson City, IL 60936							
Name of Camper:								_
Grade (2017-18 Schoo	l Year)							_
Parents or Guardians I	Names:							_
Phone:								_
E-mail:								_
Shirt Size (Circle One):		Youth Sizes:	S	м	L			
		Adult Sizes:	S	М	L	XL	XXL	

In accepting this entry I understand that the GCMS High School Camp Staff, their agents, representative committees, and the GCMS Board of Education are not responsible for any accidental damages or injuries suffered by me or my camper directly during the camp or travel to and from GCMS Basketball Camp.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_

\*\*\*PLEASE RETURN THIS SHEET FILLED OUT (INCLUDING THE WAIVER FORM ON BACK) AND A COPY OF YOUR INSURANCE AS PROOF OF INSURANCE (PHOTO COPY OF INSURANCE CARD IS PREFERRED)\*\*\*

Contact Ryan Tompkins with any questions – 217-781-1778 or Tompkins.ryan@gcmsk12.org