

2018 NVWBCA SHOWCASE REGISTRATION FORM

INSTRUCTIONS:

1. Print and fill out form.

ALL INFORMATION must be COMPLETE with parent signature FOR PLAYER PACKET!!!

2. Registration fee is **\$95**. Please make checks payable to NVWBCA.

Credit cards are also accepted via PayPal payment to: fred.priester@gmail.com. See website instructions.

3. Checks and completed (AND SIGNED) registration forms may be mailed to:

NVWBCA c/o Fred Priester, 13311 Poplar Tree Rd., Fairfax, VA 22033

4. Completed (AND SIGNED) registration forms may be scanned and emailed to fred.priester@gmail.com

***** Registration deadline is September 28, 2018 *****

Name _____ DOB ____/____/____

Address _____ City _____ State _____ Phone ____-____-____

High School _____ Coach _____ Phone ____-____-____

H.S. Address _____ City _____ State _____ Zip _____

AAU Team _____ Coach _____ Phone ____-____-____

Position (Circle all that apply) 1 2 3 4 5 Hgt _____ Wgt _____ Grade _____ GPA _____ PSAT/SAT _____

E-Mail Address _____

MEDICAL CONSENT: I hereby state that my child is in good normal health and has my permission to participate in all activities. In addition, I authorize the camp staff to act for my child in the event of an injury or illness. A registration requires that a parent/guardian sign below to agree that in the case of an accident involving their child while attending NVWBCA Showcase camp, they release the camp, sponsors, counselor and the Director from any and all liability.

PARENT SIGNATURE _____

PRINT NAME _____ DATE ____/____/____

Questions? Email fred.priester@gmail.com or call 703-599-5898