

2017 New York HoopSchool July Skills Classic Camp Registration Form

Parents Email Address: _____

Players First Name: _____

Player Middle Name: _____

Players Last Name: _____

Address _____

City: _____

State: _____

Zip Code: _____

Cell Phone or Home Phone: () _____ - _____

Work Phone: () _____ - _____

Date of Birth: ____/____/____

Gender: Male or Female

High School: _____

Height: _____

Weight: _____

Important Dates:

*Trip will be January 23rd thru January 31st. (Basketball Camp will start on 24th)

*Due date for the down payment of \$500 is November 30th.

*Due date for the rest of the trip fee is December 30th.

