

DEAR COACH,

I am so excited about the upcoming summer and I hope you are making plans to attend an NBC Team Camp. Lots of new teams have called requesting information and are getting enrolled. Below you will find the two registration options that have worked best for most coaches. Please select one and contact me at the number or email address below. I hope this will be the best week of your team's summer and I'm confident you will experience good competition, grow as a team, and set goals that will take you to the conference championship and maybe even a state tournament.

Yours in sports,

Danny M. Beard



## HOW TO REGISTER

1. Call or email Danny Beard to reserve your team a spot at camp as soon as possible. Minimum of 8 players per team. These camps do fill up and spots will be reserved on a first-come first-serve basis. 800.406.3926 or danny@nbccamps.com

Note: there is a one-time \$5 registration fee per player.

### Option #1

Send \$500 non-refundable deposit per team to

NBC Camps

10003 N. Division Suite 100

Spokane, WA 99218

When your team arrives at camp, the coach must present a completed registration form for each team member and ONE check to include full payment for all athletes less the \$500 deposit. No camper confirmation emails will be sent.

### Option #2

Send completed registration forms along with \$140 deposit for each team member.

NBC Camps

10003 N. Division Suite 100

Spokane, WA 99218

Personal email confirmations will be sent to each teammate and final payments will be made by parents directly to NBC Camps.

NBC CAMPS ATTN: DANNY BEARD  
10003 N DIVISION STE 100  
SPOKANE, WA 99218

### sample schedule

7:20am	WAKE UP
7:20-8am	BALL HANDLING
8-8:45am	BREAKFAST
9-10:30am	LIVE-ACTION INSTRUCTION
10:30-Noon	GAMES/TOURNAMENT
Noon-1pm	LUNCH
1-5:30pm	GAMES
5:30-6:30pm	DINNER
6:30-8pm	GAMES/ACTIVITY
8:30-9:30pm	COACHES CLINICS
9:30-10pm	TEAM DISCUSSIONS
11pm	LIGHTS OUT

## Register now...

ATHLETE FIRST NAME:	M.I.:	LAST NAME:
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
HOME PHONE: ( )	CELL PHONE: ( )	
BIRTHDATE: / /	AGE:	GENDER: M / F
EMAIL ADDRESS: (REQUIRED FOR EMAIL CONFIRMATION OF REGISTRATION)		
HEAD COACH NAME:	SCHOOL NAME:	GRADE:
ADULT JERSEY SIZE: <input type="radio"/> YL <input type="radio"/> S <input type="radio"/> M <input type="radio"/> L <input type="radio"/> XL <input type="radio"/> XXL	CAMP LOCATION:	
METHOD OF PAYMENT: <input type="radio"/> CHECK <input type="radio"/> VISA <input type="radio"/> MASTERCARD	FULL NAME ON CREDIT/DEBIT CARD:	
CARD NUMBER:	EXP. DATE: /	CHARGE AMOUNT: INCLUDE \$5 REG. FEE \$

**\$140 DEPOSIT FOR EACH REGISTRATION**

## REQUIRED TO PARTICIPATE

### NBC CAMPS LIABILITY POLICY

I the undersigned parent/guardian of the individual named above, a minor, do hereby agree to allow the individual named herein to participate in the aforementioned activity and authorize and appoint the program directors and/or instructors as Attorneys in Fact and agents for the undersigned to consent to medical, surgical and/or dental examinations, in addition to any and all other treatments that may be deemed necessary by medical personnel. It is understood that participation involves an element of risk and a danger of accidents. Knowing those risks, I hereby assume those risks. In addition, I understand that by signing this agreement, I hereby release and discharge NBC Camps from any and all liability resulting in injury associated with the camper's participation in this activity. I understand it is my responsibility to inform camp personnel of any medical conditions, allergies, food restrictions or any other special needs my son/daughter may have. In the absence of a parent/guardian's signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release.

- ▶ I give NBC Camps full permission to use my child's photo in future promotional brochures, poster, and/or website.
- ▶ I have read and understand NBC Camps' Liability, Cancellation Policy and Formula for Success.

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PARENT/GUARDIAN SIGNATURE

