

SVIBA FAB 50 High-Performance Boys Basketball Camp
Registration Form

Camper's Name: _____ School: _____

Address: _____ Postal Code: _____ Phone: _____

Email Address: _____ T-Shirt Size: _____
(ADULT SIZING ONLY)

Current Grade: _____ Height: _____ Birthdate (M/D/Y): _____

-The position I would like to play during the camp is: guard / wing / post
(CIRCLE ONE)

MEDICAL TREATMENT RELEASE AND LIABILITY WAIVER:

I approve of my child's attendance at the SVIBA High-Performance FAB 50 Camp and I certify he is in good health and he is able to participate in the camp activities without limitations. I hereby authorize the directors and the coaches involved with the FAB 50 Camp to act for me according to their best judgment in any emergency requiring medical attention. I hereby waive and release the Spectrum Secondary School, Greater Victoria School District, Belmont Secondary School, Sooke School District, and the South Vancouver Island Basketball Association and the SVIBA FAB 50 Camp and all employees, volunteers, agents or assigns of these groups from any and all liability which may arise from my child's participation in this camp. **I acknowledge I am responsible for any and all medical expenses incurred due to my child's illness or injury during the camp.**

I also acknowledge registration fees **WILL NOT BE RETURNED** unless a doctor's certificate is presented **PRIOR** to the start of the camp; **NO MONEY WILL BE RETURNED** if an injury or illness occurs or is reported **AFTER THE CAMP BEGINS**. Registration fees for this camp **WILL NOT** be returned for any reason after the camp begins.

Parent / Guardian Signature: _____

Medical Number: _____ Date: _____

-During this camp, I want to be considered for selection to one of the SVIBA's boys spring / summer select teams: **YES NO** (circle one)

-Midget / Youth / Development Teams will be finished by June 23.

-practices are generally Tuesday (6:00-7:30 p. m.) and Thursday (5:00-6:30 p. m.)

-Futures Teams will be tentatively finished by June 23.

- practices are generally Tuesday (7:30-9:00 p. m.) and Thursday (6:30-8:30 p. m.)

-Juvenile Team will be tentatively finished by mid-July.

- practices are generally Tuesday (7:30-9:00 p. m.) and Thursday (6:30-8:30 p. m.)

-Make FAB 50 Camp registration fee cheques for \$125 payable to:

SOUTH VANCOUVER ISLAND BASKETBALL ASSOCIATION

-Mail cheques to: Brett Westcott, SVIBA President

#441-40 Gorge Road West, Victoria, B. C., V9A – 1L8

OR

etransfer camp fee to westcott@shaw.ca

-REMEMBER – REGISTRATION DEADLINE IS THURSDAY, APRIL 3, 2025