

Camp Director	r: Brett Norris - (6	514)542-7636	or brett_norri	s@hboe.org		
Boys Varsity E	Basketball Coach	Hilliard B	radley High Sc	hool 🔶 (614) 921-74	00	
) – June 16-18 th – 9a – June 16-18 th – 12p		
	Session #1 - \$75 Session #2 - \$100	Ch	ecks Payable t	o: <u>Bradley 6th Man C</u>	<u>Club</u>	
LOCATION: D	- Indi - Exci - Offe - Brac	vidual Coach ting Week of ensive & Defe dley Camp T	ning Attention f Basketball ensive Fundam	FEATURES: ental Instruction	- A	A Quality
The opinions, j the school dist	-	s and/or serv	ices of this org	anization are neithe	<mark>r sponsored n</mark>	<mark>lor endorsed b</mark> y
			Remove H	ere		
RETURN TO:	: Brett Norri 3061 Descer Hilliard, Ol r Hilliard Bradley	H 43026	•ector			
rppication io	1 IIIIIai u Di auley	Dasketball	amp			
Name Parent/Guardian Name						
Address	<u></u>	<u></u>		Phone		
5	Street	City	Zip			
E-Mail Addres	ss					
Grade 2025-26	6 Year Scl	hool 25-26		_ Emergency Phone		

<u>ADULT T</u> - Shirt Size: S M L XL <u>Youth T</u>- Shirt Size: S M L

In consideration of the youth named herein and the opportunity for that youth to voluntarily participate in the Bradley Basketball camp, I hereby release and discharge Brett Norris, Hilliard City Schools, and the instructors of any injuries or illnesses which may result because of participation in this camp. By signing this form, you, on behalf of yourself and your son or any other persons for whom you are legal guardian, confirm: (1) That you understand the statements contained on this from; and (2) That you release Brett Norris, any coach, and the Hilliard City Schools form any claims, liability, injury, or damages occurring during this camp.