

# 2010 Dream Team Camp

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## Century High School

June 28th, 29th & 30th

## Liberty High School

July 19th, 20th, 21st & 22nd



*Camp tuition is \$125 which includes a daily lunch!*

## Be Sure to Register Early - Space is Limited!

Learn Basic Skills and Fundamentals  
Offense and Defense  
Ball Handling & Much More

**Oregon Decorative Rock**



Register Online  
[www.dreamteamcamp.com](http://www.dreamteamcamp.com)

Or Contact  
Larry Jury (503) 320-1594



## REGISTRATION FORM

(One child per registration form, please)

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
DOB: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
 Male Phone Number: \_\_\_\_\_  
 Female Emergency Contact: \_\_\_\_\_  
Shirt Size S M L XL Emergency Number: \_\_\_\_\_  
(Youth sizes only) Email: \_\_\_\_\_

**Fees:** Attend this clinic for only \$115.00. Be sure to add \$10.00 for a delicious box lunch!

Yes! I would like a box lunch for this clinic.

**Make your check payable to:** Dream Team Basketball. **Send this form and payment to:** Dream Team Basketball,  
P.O. Box 11711, Portland, OR 97211

**You can also register on the web at: <http://www.dreamteamcamp.com>**

All fees (less a \$20.00 cancellation fee) are refundable until 2 days before the camp begins.

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### Agreement Release and Waiver of Liability

IN CONSIDERATION OF the opportunity to participate in the Dream Team Basketball's Basic Skills Camp™, herein referred to as "the camp", I agree as follows:

1. I understand and acknowledge that participation in the camp may be dangerous and may involve risks and/or bodily injury. I also understand and acknowledge that the social and economic losses or damages which can result from those risks and dangers can be severe and that not all such risks and dangers may be known or reasonably foreseeable at this time. I accept the responsibility for losses or damages resulting from all such risks and dangers involved in participation in the camp.
2. I agree to take appropriate precautions for my own safety and that of others when participating in the camp and further agree that, before participating I will inspect the facilities and equipment to be used and will, if I believe anything is unsafe, immediately advise the person in charge of that unsafe condition and will refuse to participate.
3. I HEREBY RELEASE, WAIVE AND DISCHARGE DREAM TEAM, and its coaches, instructors, officials, facilitators and volunteers engaged by DREAM TEAM in the conduct of the camp, from all liability to me and my conservators, guardians or other legal representatives, and damages on account of any injury, including but not limited to bodily injury, arising out of my participation in the camp, whether on the premises or elsewhere.
4. I ALSO HEREBY AGREE TO INDEMNIFY AND TO HOLD HARMLESS from any claim or demand on account of injury or damage which I may suffer as a result of participation in the camp and all other persons mentioned in Paragraph 3.
5. I understand that this release, waiver, and agreement to indemnify and hold harmless includes, but is not limited to, damages which are caused, or alleged to be caused, in whole or in part by the negligence of DREAM TEAM and the individuals listed in paragraph 3.

I HAVE READ THE ABOVE AGREEMENT OF RELEASE AND WAIVER OF LIABILITY AND UNDERSTAND THAT BY SIGNING IT I HAVE GIVEN UP SUBSTANTIAL RIGHTS. I SIGN THIS AGREEMENT VOLUNTARILY.

Signature of Participant (if over 18 years of age) \_\_\_\_\_ Date \_\_\_\_\_

I am the parent or legal guardian of \_\_\_\_\_ who is under the age of 18 years and who wishes to participate in the Dream Team Basic Skills Camp. In consideration of the Dream Team Basic Skills Camp allowing my child or ward to participate in the camp, I hereby agree to indemnify Dream Team Basketball and all other persons described in Paragraph 3 above, and to hold each and all of them harmless from any claim or demand on account of injury to or damaged suffered by my child or ward as a result of participation in the camp, whether on camp premises or elsewhere.

This agreement includes, but not limited to, claims or demands on account of injury or damage causes or allegedly caused by the negligence of Dream Team or any of the individuals listed in Paragraph 3.

Signature of Parent or Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

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### KEEP THIS PORTION FOR YOUR RECORDS

We have signed up for Dream Team Basketball Basic Skills Camp to be held on \_\_\_\_\_ at \_\_\_\_\_.

Each day your child should bring along, a good attitude and a expectation for lots of fun, a sack lunch with beverage (if you did not pre-order one), towel, shorts, t-shirts, socks and non-marking tennis shoes or basketball shoes.

Remember: Camps start on time and run until the times indicated on the reverse of this sheet.

**There is NO aftercare available.**

If I have questions about this camp I can contact Dream Team Basketball at 503-320-1594.

**Visit us on the web at: <http://www.dreamteamcamp.com>**