

2009 Bard College Basketball Camp
P.O. Box 5000 ~ Annandale, NY 12504
(845) 758-7334

Please register my child for:

_____ Week 1	June 29-July 3	1/2 Day	\$135.00
_____ Week 2	July 27-31	Full Day	\$225.00
_____ Week 3	August 3-7	Full Day	\$225.00

Camper's Name _____

Birth Date _____ Age _____

Gender: _____ Male _____ Female

Address _____

City _____

State _____ Zip _____

Daytime Phone _____

Evening Phone _____

Cell Phone _____

E-Mail _____

Parent/Guardian _____

T-Shirt Size (Please circle one)

Youth: Small Medium

Adult: Small Medium Large XL

Please include a \$50.00 deposit for each week your child is registered, payable to Bard College Basketball Camp, and mail to the address above.

Bard Employee: (please circle one) Yes No