

# SRV WOLVES JV MEN'S BASKETBALL 7 WEEK CAMP \$450



WEEK 1	JUNE 10TH-14TH	3-5PM AUX GYM
	*JV PHILOSOPHY TEAM MEETING ON WEDNESDAY, JUNE 12TH @9AM-12PM IN ROOM A202	
WEEK 2	JUNE 17TH-21ST	2-4PM AUX GYM
WEEK 3	JUNE 24TH-28TH	2-4PM AUX GYM
WEEK 4	JULY 1ST-3RD	2-4PM AUX GYM
WEEK 5	JULY 8TH-12TH	2-4PM AUX GYM
WEEK 6	JULY 15TH-19TH	11AM-1PM AUX GYM
WEEK 7	JULY 22ND-26TH	10:30-1PM MAIN GYM

SUPERVISED BY:  
**SRV COACHING STAFF**

PROCEEDS BENEFIT SRV MEN'S BASKETBALL PROGRAM  
Cost covers camp, summer jersey, tournaments and/or leagues for  
all levels. Sibling discount available.  
Email Coach Brian Botteen: [Bbotteen@srvusd.net](mailto:Bbotteen@srvusd.net) for questions



## MEN'S BASKETBALL CAMP

The San Ramon Valley High School Men's Basketball Camps serve as a fundraiser for the Men's Basketball Program. The funds from the camp will be used for general operating expenses for the Men's Basketball program. The summer camp fundraising opportunity is not intended for summer employment for coaches. Summer Camps shall not be a prerequisite or result in preferential treatment when participating in a district athletic program. Summer Camps are open to everyone!

CAMPER'S NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_ GRADE ENTERING: \_\_\_\_\_

CIRCLE DESIRED SHIRT SIZE FOR CAMP:    **S**    **M**    **L**    **XL**    **2XL**

PARENT CELL PHONE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

INSURANCE: \_\_\_\_\_ POLICY #: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ CELL PHONE #: \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_

Make checks payable to:  
SRV Men's Basketball  
\$450

Mail this page, waiver, and check to:  
SRV Men's Basketball Director  
SRVHS  
501 Danville Blvd  
Danville, Ca 94526



# San Ramon Valley Unified School District

## EXTRA CURRICULAR ACTIVITIES

### VOLUNTARY PARTICIPATION FORM

and

### ACKNOWLEDGMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize myself/my son/daughter, \_\_\_\_\_ to

participate in the district sponsored activities of \_\_\_\_\_.

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that participation in these activities is completely voluntary and as such is not required by the District for course credit or for completion of graduation requirements.

I understand and acknowledge that in order to participate in these activities, my son/daughter and I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities.

I understand, acknowledge, and agree that the San Ramon Valley Unified School District, its employees, officers, agents, or volunteers shall not be liable for any injury/illness suffered by myself, my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity and I voluntarily assume all risk, known or unknown, of injuries, howsoever caused, even if caused in whole or in part by the action, inaction, or negligence, of released parties to the fullest extent allowed by law.

The undersigned agrees to defend, indemnify and hold harmless the San Ramon Valley Unified School District, its Board of Trustees, officers, agents and employees, individually and collectively, from and against all costs, losses, claims, demands, suits, actions, payments and judgments, including legal and attorney fees, arising from personal or bodily injuries, property damage or otherwise, regardless of and however caused, brought or recovered against any of the above that may arise for any reason from or during or be alleged to be caused by the undersigned's (use/occupancy of District's facilities, furniture or equipment, or nature of activity).

I acknowledge that the above named participant is in good health, and fully able to participate in the activities, including activities which are strenuous in nature.

I have carefully read this VOLUNTARY ACTIVITIES PARTICIPATION FORM and as a participant and that I understand and agree to its terms.

\_\_\_\_\_  
Parent/Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file before a participant will be allowed to participate in the above extra-curricular activities.