



Application form for Summer 2010

PLEASE SELECT LOCATION

- | | |
|-------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Cardinal Gibbons (ages 4-16) | <input type="checkbox"/> Coral Springs Charter (ages 4-16) |
| <input type="checkbox"/> Sagemont (ages 4-16) | <input type="checkbox"/> Pembroke Pines area (ages 11-16) |
| <input type="checkbox"/> Archbishop (ages 4-10) | |

Please refer to website for exact dates and locations www.allamericanbasketballschool.com

- | | |
|--------------------------------------------|------------------------------------------------|
| <input type="checkbox"/> June 14 – June 18 | <input type="checkbox"/> July 19 – July 23 |
| <input type="checkbox"/> June 21– June 25 | <input type="checkbox"/> July 26 – July 30 |
| <input type="checkbox"/> June 28 – July 2 | <input type="checkbox"/> August 2 – August 6 |
| <input type="checkbox"/> July 5 – July 9 | <input type="checkbox"/> August 9 – August 13 |
| <input type="checkbox"/> July 12 – July 16 | <input type="checkbox"/> August 16 – August 20 |

Camper Name: _____ Gender: M/F _____

Date of Birth: _____ School Currently Attending: _____

Home Phone: _____ Emergency Phone: _____

Address: _____

City: _____ State _____ Zip _____

Payment Method: Amount _____ Check Credit Card

Credit Card # _____ CVV Code _____ Exp Date _____

Medical Insurance Company: _____ Policy # _____

Parent Name: _____ Referred by: _____

Parent Signature: _____ E-Mail: _____

(AUTHORIZES ENROLLMENT AND TREATMENT IN CASE OF EMERGENCY)

Total tuition cost is \$240 per week, a \$50 deposit (per week) is due immediately to guarantee your reservation.

Return this form along with deposit to:

All American Basketball School • 8930 W State Road 84, #333 • Davie, FL 33324

Tel: (954) 472-2663 • Fax (954) 472-1663 • www.allamericanbasketballschool.com