

# 2022 NVWBCA SHOWCASE REGISTRATION FORM

## INSTRUCTIONS:

1. Print and fill out form.

**ALL INFORMATION must be COMPLETE with parent signature FOR PLAYER PACKET!!!**

2. Registration fee is \$90. Please make checks payable to NVWBCA.

Credit cards are also accepted via PayPal payment to: [nvwbca@gmail.com](mailto:nvwbca@gmail.com). See website instructions.

3. Checks and completed (AND SIGNED) registration forms may be mailed to:

**NVWBCA c/o Fred Priester, 13311 Poplar Tree Rd., Fairfax, VA 22033**

4. Completed (AND SIGNED) registration forms may be scanned and emailed to [fred.priester@gmail.com](mailto:fred.priester@gmail.com)

**\*\*\* Registration deadline is 12 Noon on September 24, 2022 \*\*\***

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\* Name \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_

High School \_\_\_\_\_ Coach \_\_\_\_\_ Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_

H.S. Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

AAU Team \_\_\_\_\_ Coach \_\_\_\_\_ Phone \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Position (Circle all that apply) 1 2 3 4 5 Hgt \_\_\_\_\_ Wgt \_\_\_\_\_ Grade \_\_\_\_\_ GPA \_\_\_\_\_ PSAT/SAT \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**MEDICAL CONSENT:** I hereby state that my child is in good normal health and has my permission to participate in all activities. In addition, I authorize the camp staff to act for my child in the event of an injury or illness. A registration requires that a parent/guardian sign below to agree that in the case of an accident involving their child while attending NVWBCA Showcase camp, they release the camp, sponsors, counselor and the Director from any and all liability.

PARENT SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_ DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

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Questions? Email [fred.priester@gmail.com](mailto:fred.priester@gmail.com) or call 703-599-5898