

**KFS Kelly Jones Basketball Camp session 1 (entering grades 4<sup>th</sup> – 12<sup>th</sup>)**

**June 20 – 23<sup>rd</sup> (Monday - Thursday) 9am – 3pm**

**Participant Name** \_\_\_\_\_

**Age** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Birthdate** \_\_\_\_\_

**Home phone #** \_\_\_\_\_ **Parent Cell #** \_\_\_\_\_

**Email:** \_\_\_\_\_

**T – Shirt Size if first camp this summer** (sizes – Circle one)

YS    YM    YL    S    M    L    XL

**(Registration and payment must be received 1 week prior to camp to receive a t-shirt)**

I, \_\_\_\_\_ **(parent name)** have given permission for  
\_\_\_\_\_ **(participant's name)** to participate in athletic camps  
offered by Kenston Forest School. I agree that I will not hold Kenston Forest School legally nor  
financially responsible for any injury that may occur or condition that may result from  
participation in this camp.

**Parent/Guardian signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Payment/Check for **\$100.00 payable** to KFS must accompany this registration form. Please submit form and payment to:

Kenston Forest School  
**ATTENTION:** Joe Maione, Director of Athletics  
75 Ridge Road  
Blackstone, Virginia 23824