

**Safe Haven West Side Basketball League**

**SPRING BREAK BASKETBALL MINI-CAMP 2024**

NAME OF PLAYER \_\_\_\_\_

ADDRESS \_\_\_\_\_ APT. \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Cell: \_\_\_\_\_

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

age \_\_\_\_ date of birth \_\_\_\_\_ gender \_\_\_\_ grade \_\_\_\_ school \_\_\_\_\_

Name of Parents/Guardians:

1. \_\_\_\_\_ daytime tel: \_\_\_\_\_

2. \_\_\_\_\_ daytime tel: \_\_\_\_\_

Emergency contact: (if different from above)

ENROLLMENT IS LIMITED! Questions? Contact us at [shwsbasketball@gmail.com](mailto:shwsbasketball@gmail.com)

**Mail or Drop off** form & payment payable to: Safe Haven West Side Basketball League  
c/o Copy Experts, 2424 Broadway, Box 257 (89<sup>th</sup> Street), New York, NY 10024

**Register online:** [www.safehavenhoops.net](http://www.safehavenhoops.net) starting April 3<sup>rd</sup>.

Tuesday, April 23 \_\_\_\_\_

Wednesday, April 24 \_\_\_\_\_

Thursday, April 25 \_\_\_\_\_

Friday, April 26 \_\_\_\_\_

Payment **RECEIVED BY APRIL 16:** 4 days \$185; single days \$60 per day

Payment **RECEIVED AFTER APRIL 16:** 4 days \$225; single days \$65 per day

Enclosed is my check in the amount of \_\_\_\_\_.

Parent/guardian signature \_\_\_\_\_