



WED NITE HOOPS

WedNiteHoops/Robert Stodgell

I, _____, (parent and/or legal guardian) enroll

(Student's Name)

in the WedNiteHoops program at Upper Canada College in the Winter of 2015.

Further, I give my full and unconditional permission for him to participate in a WedNiteHoops basketball program at UCC on the following dates **January 7th, 14th, 21st, 28th, February 4th, (NO SESSION Feb 11th) 18th , 25th and March 4th** and agree to hold harmless Robert Stodgell, the instructors, other attendees, and or any other person or institution.

_____ I would like to enroll my son and will provide payment of \$200 on January 7th, 2015.

Please note that the early session will start at 6.30pm and go to 7.45pm. The late session will go from 7.45pm to 9pm.

Please make cheques payable to Wed Nite Hoops. No refunds will be available after January 9th, 2015.

Signature

Print Name

Date

Email

Emergency Phone Number

Grade Level