



WED NITE HOOPS

WedNiteHoops/Robert Stodgell & Jack Stodgell

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

(Student's Name)

in the WedNiteHoops program at Upper Canada College in the Winter of 2017.

I give my full and unconditional permission for him to participate in a WedNiteHoops basketball program at UCC on the following Wednesday nights starting January 11th, 2017 to March 8th, 2017 (*not including February 15th*) which would include 8 weeks (unless otherwise notified) and agree to hold harmless Robert Stodgell, Jack Stodgell, the instructors, other attendees, and or any other person or institution.

Sessions for boys up to and including grade 6 will from 6.30pm to 7.45pm. Boys in grade 7 and older will train from 7.45pm to 9pm. All sessions will be in the Lett Gym, Upper School at UCC.

_____ I would like to enroll my son and will provide payment of \$225 on or before January 11th, 2016. Cheques should be made payable to WedNiteHoops. E-transfer is a preferred option- use the email address below.

Please note that the early session for boys from JK to Grade 7 will start sharply at 6.30pm and go to 7.45pm. The late session will go from 7.45pm to 9pm for boys in Grade 7 to 12.

Please make cheques payable to Wed Nite Hoops. No refunds will be available after January 11th, 2017.

Parent/Guardian Signature

Print Name

Date

Email

Emergency Phone Number

Grade Level (Winter 2017)

Please indicate any allergies or medical issues: _____