

# NORTH

## GIRLS BASKETBALL

2016 PIAA STATE CHAMPIONS | WPIAL CHAMPIONS 2017 - 2018 - 2019 - 2020



## JUNE 13-16, 2022

**TIME:** 9:00AM-12:00PM (Grades 3-5) 1:00PM-4:00PM (Grades 6-8)

**LOCATION:** NCHS Gym **COST:** \$110 (FIRST CHILD) \$85 (ADDITIONAL CHILDREN)

*REGISTER BY MAY 15, AND RECEIVE A T-SHIRT AND BASKETBALL.*

North Catholic High School  
Department of Athletics  
1617 Route 228  
Cranberry Township, PA 16066  
[www.northcatholicathletics.org](http://www.northcatholicathletics.org)





**NORTH CATHOLIC HIGH SCHOOL**  
**DEPARTMENT OF ATHLETICS**

**CAMP APPLICATION**

*Must be completed for each participating player and returned with full payment by May 15, 2022. Space is limited!  
Walk up registrations will be accepted on the first day of camp but may not receive t-shirt or basketball. Please print clearly.  
Questions? Please contact Coach Rottmann - 412.996.7504 or [mollyhans@msn.com](mailto:mollyhans@msn.com)*

CHILD'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ OTHER PHONE: \_\_\_\_\_

PARENT NAME: \_\_\_\_\_

PRIMARY EMAIL: \_\_\_\_\_

SELECT CAMP:  RISING 3RD-5TH GRADERS (9:00AM-12:00PM)  RISING 6TH-8TH GRADERS (1:00PM-4:00PM)

COST:  SINGLE (\$110)  MULTI CHILD (\$110 FIRST CHILD/\$85 PER SIBLING)

YOUTH T-SHIRT SIZE: S M L XL

ADULT T-SHIRT SIZE: S M L XL XXL

GRADE ENTERING FOR 2022-2023 SCHOOL YEAR: 3<sup>rd</sup> 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

SCHOOL ENTERING FOR 2022-2023 SCHOOL YEAR: \_\_\_\_\_

PARISH: \_\_\_\_\_

**EMERGENCY CONTACT AND MEDICAL INFORMATION:**

NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

PHYSICIAN NAME: \_\_\_\_\_ PHYSICIAN PHONE: \_\_\_\_\_

HEALTH INSURANCE CARRIER: \_\_\_\_\_ POLICY #: \_\_\_\_\_

ANY MEDICAL CONDITIONS: \_\_\_\_\_

**MEDICAL RELEASE AND PERSONAL LIKENESS WAIVER**

The undersigned, being a parent or legal guardian of the child, does hereby affirm that the child is in good health and suffers from no illness, disability, or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved.

Furthermore, the undersigned has no knowledge of any reason the child cannot participate in rigorous physical activity. The undersigned expressly agrees to be responsible for any medical bill incurred in the treatment of any illness or accident. In the event of any such accident or injury, the undersigned hereby consents to allowing any of the camp personnel to procure any medical treatment deemed advisable on behalf of my child or ward without prior consent.

I understand that as a condition on admittance as a camper, the undersigned on behalf of the parents guardians, and on behalf of the applicant/campy, hereby releases North Catholic and all other employees, agents, or volunteers of the camp from any and all liability from injury or illness, mental or physical, suffered by the camper during or related to camp.

North Catholic has my permission to use my child's photograph, video, and audio recordings, likeness, artwork, profile, and/or story in their future publications, web pages, and other promotional materials produced, used by and representing North Catholic. I agree that there will be no compensation to me or my child for this use.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Payment options: Venmo @molly-rottman or check payable to **Molly Rottmann** and send with completed registration to:  
Molly Rottmann - 1462 Bretton Way - Pittsburgh, PA 15237