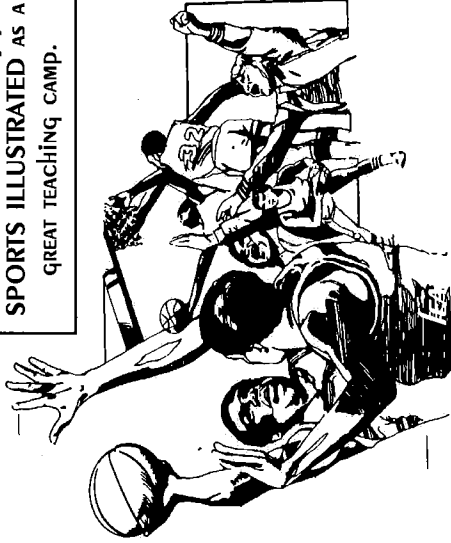


Girls Snow Valley Iowa Basketball School

1 of 2 CAMPS MENTIONED IN
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CHECK US OUT ON THE WEB AT

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*Outstanding Iowa Camp
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Directed by

DON SHOWALTER • JERRY SLYKHUIS

**AMERICA'S BEST BASKETBALL
SCHOOL**

FOR PLAYERS GRADES 6-12

July 25-28 & Aug. 3-6 AT
Wartburg College in Waverly, IA
July 22-25 AT NEBRASKA WESLEYAN in LINCOLN, NE
July 20-23 AT MISSOURI VALLEY COLLEGE
in MARSHALL, MO

Snow Valley Basketball School
Box 146
Wellman, Iowa 52356

To complete the application, please:

- 1. Type in the information**
- 2. Print out the application**
- 3. Mail to the address on the application with credit card or check payment for the full amount**

For further information call: Don Showalter (319) 936-0314 • Jerry Slykhuis (319) 277-4703

APPLICATION

Send Application to: Snow Valley Basketball School
Don Showalter
Box 146
Wellman, IA 52356

Tuition Fee For Each Session \$310.00

Enclose check for *full amount only* or charge to credit card

Credit Card Payment Visa MC # _____

Exp. Date _____ Signature _____

Check Session and Location Nebraska Wesleyan July 22-25 Wartburg College July 25-28 Aug. 3-6
Missouri Valley College July 20-23

Name (*please print clearly*) Last _____ First _____

Mailing Address _____ City _____

State _____ Zip _____ Home Phone () _____

School _____ Grade in School (Sept. 2008) _____ Height _____

Email Address _____

Daytime emergency phone number _____

Please note any medical conditions that we should be aware of: _____

I hereby authorize the Directors of Snow Valley Basketball School to act for me according to their best judgement in any emergency requiring medical attention and I hereby waive and release Snow Valley Basketball School from any and all liability for any injuries or illnesses incurred while at Snow Valley Basketball School. I will be responsible for any medical or other charges in connection with my daughter's attendance. I know of no medical or physical problem which may affect my child's ability to safely participate in this program.

Parent or Guardian's Signature _____ Policy Number _____