

## Parents Release for Lady Griz Camp

"I hereby request and authorize the proper authorities of Lady Griz Cage Camp to refer my daughter to a clinic selected by the basketball school, for treatment of illness, injury or both; and I further authorize the Physicians selected by the Basketball Camp to treat said injury or illness as they think best for the most advantageous welfare of the patient. I also waive the Lady Griz Cage Camp from any financial responsibility from illness or accident while at camp as such costs will be covered by our personal medical insurance."

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Parent/Guardian Signature

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Insurance Company

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Policy Number