

Greensboro Sportsplex
2400 16th Street
Greensboro, NC 27405
Office 336-358-2100 (FAX) 336-373-4120
[Email drudd99@aol.com](mailto:drudd99@aol.com)
www.ncbasketballacademy.net



**Application
Gym Rats
Rising Stars Exposure Camp
August 8th - 9th, 2009**

Cost: **\$200.00** Registration Deadline: **August 3, 2009**

Participant's Name: _____

Parent's Name: _____

Email: _____ Birthdate: ____/____/____ Ht. _____ Wt. _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone (____) _____ School Phone (____) _____

Playing Position: G F C (Circle One) Name of High School Head Coach _____

2008/2009 School Year Grade 6 7 8 9 (Circle One) Boys or Girls (Circle One)

High School to attend: _____

City _____ Adult Jersey/Shirt Size: S M L XL 2XL

State: _____ Zip: _____ Adult Short Size: S M L XL 2XL

Make Checks Payable to:
Mail Entries to: NCBA
2400 16th St
Greensboro, NC 27405

NCBA Any Questions Please Call:
336-358-2100
website: www.ncbasketballacademy.net
**THIS FORM MUST BE RETURNED
WITH PAYMENT NO LATER THAN
AUGUST 3, 2008**

Online registration is available at: www.ncbasketballacademy.net

A liability waiver must be
submitted with camp applicaton.