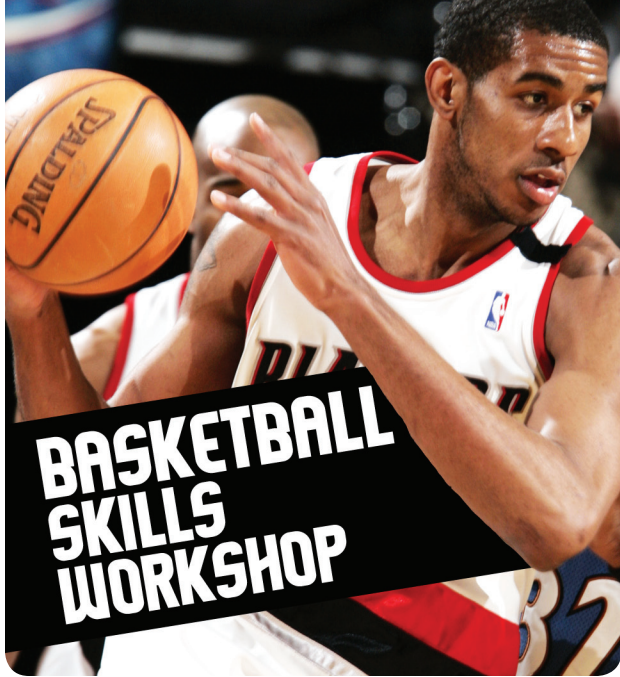


# LAMARCUS ALDRIDGE



Portland Trail Blazers forward LaMarcus Aldridge wants every child to enjoy the great game of basketball. The one-day, co-ed basketball clinic is designed for experienced, serious players in 6th through 11th grades. Stocked with the finest, local-area coaches and a small player-to-coach ratio, the LaMarcus Aldridge Basketball Skills Workshop will provide that personal attention to each participant.

## ONE-DAY CLINIC

Boys/Girls Grades 6-8 and 9-11

9 a.m. - 3 p.m. \$75 each

Deadline to Register: Monday, August 22 at Noon

- #1 **Club Sport, Tigard, OR**  
Tue., August 23, 2011      Grades 6-8
- #2 **Lakeridge High School, Lake Oswego, OR**  
Wed., August 24, 2011      Grades 9-11
- #3 **Fort Vancouver High School, Vancouver, WA**  
Thu., August 25, 2011      Grades 6-11

Campers are asked to bring their lunch.

**For more information log on to**  
AthleteFoundations.com  
or call 206.227.9387

## SPECIAL WORKSHOP FEATURES

- » Portland Trail Blazers forward LaMarcus Aldridge providing hands-on instruction each workshop
- » Enrollment is limited to ensure maximum attention to each participant
- » Special guests
- » All campers receive a LaMarcus Aldridge Camp T-Shirt, along with other special surprises.

### APPLICATION FOR LAMARCUS ALDRIDGE BASKETBALL SKILLS WORKSHOP

**Parents/Guardians:** Please complete this application, detach and mail. Be sure to sign where indicated. A photocopy of the application will also be accepted. Please Print. If your camper wishes to be with his or her friend(s), please submit all applications together. Space is limited. REGISTER EARLY!

Location: (Check the clinic location you would like to attend)

- Club Sport (Tigard, OR)
- Lakeridge High School (Lake Oswego, OR)
- Fort Vancouver High School (Vancouver, WA)

Camper's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact person: \_\_\_\_\_

E-mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Camper's Age: \_\_\_\_\_  Male  Female

If necessary, please note camper's allergies/medical conditions/physical problems of which camp staff should be aware: \_\_\_\_\_

**Family Discount:** With one child's tuition paid in full, each additional child within the immediate family will receive a 10% discount.

**Refund Policy:** \$25 is non-refundable. Refund requests must be submitted in writing and will be given for medical reasons or death in the family only.

**Payment:** (Application must accompany payment)  
Please make checks payable to:  
LaMarcus Aldridge Basketball Skills Workshop

**Please mail or fax applications to:**  
LaMarcus Aldridge Basketball Skills Workshop  
Attn: Matthew Wade – Camp Coordinator  
551 N 170th Place  
Shoreline, WA 98133

**Phone:** (206) 227-9387  
**Fax:** (206) 801-7710  
**E-mail:**  
lamarcusaldridge12camp@yahoo.com

#### PARENTS: PLEASE READ THE STATEMENT BELOW AND SIGN.

In consideration for allowing the above camper ("Minor") to participate in the LaMarcus Aldridge Basketball Skills Workshop (the "Event") held at Club Sport, Lakeridge High School, or Fort Vancouver (Venue), I, as the parent and/or legal guardian of Minor, for myself, and on behalf of Minor and his/her parents, heirs, executors, administrators, next of kin, successors, and assigns, all of whom shall be legally bound by this release, hereby agrees as follows:

1. Minors under 18 years of age and I am 18 years of age or older. I acknowledge that Minor is not required to participate in the Event. His/her participation is voluntary and solely for Minor's benefit and entertainment. I understand that said Minor can withdraw from the Event at any time. We understand there are inherent risk associated with Minor's participation and use of the Venue. We understand and acknowledge that basketball is an action sport that may present a significant risk of personal injury to Minor. We further understand and acknowledge that Minor's participation in the Event may require him/her to engage in strenuous and/or potentially dangerous activities. Neither Minor nor I are aware of any reason, medical or otherwise, why Minor should not participate in the event, and we are prepared to, and do, hereby accept any and all risks, whether known or unknown to Minor and/or me, of having Minor participate in the Event.

2. Minor and I agree to indemnify, release, forever discharge and hold harmless, and I covenant not to sue, the hosts and their respective partners, owners, stockholders, directors, officers, employees, agents, representatives, heirs, successors, and assigns, and each and every person acting by, through, under, or in concert with them, or any of them (hereinafter individually and collectively referred to as the ("Indemnified Parties"), of and from all manner of action or actions, cause or causes of action, at law or in equity, suits, claims, demands, damages, liability, lost cost or expense, of any nature whatsoever, known or unknown, fixed or contingent (hereinafter referred to as "Claims") which Minor and/or I may have or hereafter have against the Indemnified Parties by reason of any injuries that Minor may sustain, whether to his/her person and/or property, as a result of or incident to the Indemnified Parties' negligence (whether active or passive), Minor's participation in the Event, and/or any and all risks assumed by Minor and/or me hereunder.

3. I hereby authorize and grant the right to Indemnified Parties and/or anyone authorized by them or acting on their behalf to use, record, reproduce, publish or depict my voice, recording, photograph, and/or likeness, in any manner that they deem necessary or appropriate, in all media, worldwide perpetuity, in and in connection with the production, distribution, marketing, promotion, advertisement, packaging, sale, publication, exhibition, and/or exploitation of the Event, including, without limitation, in any and all print advertisements, broadcasts, telecasts, and/or retransmissions of or regarding the Event. This may be done without any further permission from me and without any fee or other compensation to me.

Parent or guardian's signature: \_\_\_\_\_