

Champions International, Inc. Byron Starks, Executive Director
P.O. Box 60561, Lafayette, LA. 70596, Ph: 337-408-3734 * Fax. 337-408-3734
www.championsforlife.com byron@championsforlife.com



Sept.

7th

Boys & Girls Grades K5-8th
Fall Shooter's Clinic - \$25 (9:00 A.M. – 11:00 A.M.)

Here are the Benefits of Attending:

- Improved Skills
- Improved Knowledge of the Game
- Stimulate Game - Like Instincts



LSUE HPRE Activity Center
2048 Johnson Hwy, Eunice, LA.



Only \$25

www.championsforlife.com

September 7th \$25

CHILD'S NAME _____ CHILD'S DATE OF BIRTH ___/___/___

CHILD'S ADDRESS _____

Email: _____ GRADE ENTERING IN FALL OF 2019 _____ HT. _____ AGE _____

I, the undersigned, authorize, submit that my child _____, is physically fit to participate in strenuous athletic activity and waive the **PLAYER'S CHOICE BASKETBALL SCHOOL, LSUE** its staff, affiliated entities, their officers, agents and employees from arising out of, or in connection with, my child's participation in this basketball school.

Signature of Parent/Guardian _____ Ph.1 _____ Ph.2 _____

Please fill out and return with your **\$50.00** deposit by deadline of the camp of your choice. **(Deposit is non-refundable)**
Make all checks payable to **CHAMPIONS INTERNATIONAL & Return to P.O. Box 60561, Lafayette, LA. 70596**

DATE REC'D:	FEE	CHECK#	OWE	CASH
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