Permission Slip

Name	
Grade	
School	
Laken James LLC Basketball Ca School District, I, my heirs, exe parents, coaches, their agents damages of injuries, training, o	nce of this entry in the Five Star Academy & np, the Appleton North, and Appleton North utors and administrators, waive and release nd representatives from all claims or rights to mpeting or traveling to and from this basketball ned by the parents or guardians from this
	has my permission to participate in the Five Star
Academy & Laken James LLC E	sketball Camp on June 24th 2024
Parent/Guardian Signature	Date