

## Permission Slip

Name \_\_\_\_\_

Grade \_\_\_\_\_

School \_\_\_\_\_

In consideration of your acceptance of this entry in the Five Star Academy & Laken James LLC Basketball Camp , the Seymour Schools, and Seymour School District, I, my heirs, executors and administrators, waive and release parents, coaches, their agents and representatives from all claims or rights to damages of injuries, training, competing or traveling to and from this basketball camp. All liabilities will be assumed by the parents or guardians from this basketball camp,

\_\_\_\_\_ has my permission to participate in the Five Star Academy & Laken James LLC Basketball Camp on June 6th, June 7th, and June 8th 2023.

\_\_\_\_\_  
**Parent/Guardian Signature**

\_\_\_\_\_  
**Date**