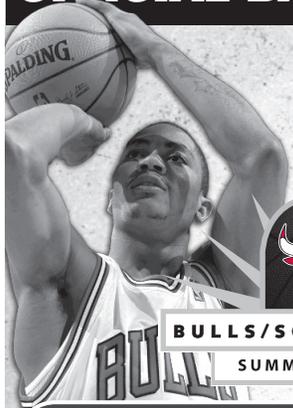


# OFFICIAL BASKETBALL SUMMER CAMPS of the CHICAGO BULLS



**BULLS/SOX ACADEMY**  
SUMMER CAMPS

**Date: July 8 - 12**

**Ages: 6 - 12**

**Time: 8:30 - 11:30a**

**Code: 33003ANT1**

**Cost: \$199**

**SPACE IS LIMITED...  
SIGN UP TODAY!**

## COMING TO YOUR NEIGHBORHOOD...

**ANTIOCH, IL  
Hillcrest School  
433 E. Depot Street**

No one can teach basketball better than the Chicago Bulls! This summer, come learn from the best and let the Chicago Bulls teach you how to play like a Champion. The Chicago Bulls Summer Camp is offered in two age groups. The rookie camp for children ages 6-8 is a beginner camp focused on building fundamentals and fun drills to get the kids to understand the game and improve their play. For the older kids, ages 9-12, coaches work on the "team" concept and refining/advancing skills in ball handling, passing, shooting, rebounding and footwork.



## EXCLUSIVE behind-the-scenes United Center experience...

Here's the chance for a rare experience at the home of the Chicago Bulls! Every Chicago Bulls summer camp participant, along with one guest, will be invited to the United Center for an Exclusive behind-the-scenes tour and a special Q & A session with a Bulls radio/TV personality and a current or former Bulls player.

Each camper also receives a Chicago Bulls duffle bag, Bulls indoor/outdoor basketball, camp t-shirt, evaluation report and graduation certificate.

### SKILLS COMPETITION

During all of the camps, each player will compete in the Bulls Skills Competition. At the end of the summer, the top 3 scores in each skill by age group will compete in the finals at the United Center (date TBD)!

**Visit our website @  
BullsSoxAcademy.com**

**Mail form to: Bulls/Sox Academy  
6200 River Bend Drive • Lisle IL • 60532  
Or Fax to: (630) 324-8265**

Parent/Guardian Name: \_\_\_\_\_

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

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

Home Number: (\_\_\_\_\_) \_\_\_\_\_ Work Number: (\_\_\_\_\_) \_\_\_\_\_

Email Address (Required for Camp Confirmations): \_\_\_\_\_

Emer.Contact: \_\_\_\_\_ Emer.Contact Phone: (\_\_\_\_\_) \_\_\_\_\_

Participant's First Name (include last name if different)	Program Code	Sex	Age	Date of Birth MM DD YY	T-Shirt Size*	Fee

Payment Method (circle one):    Check    Visa    Mastercard    Discover    Amex    \*Note: Not all programs include t-shirts

Credit Card #/Check Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Verification Code: \_\_\_\_\_ Card Holder Signature: \_\_\_\_\_ Total Amount: \_\_\_\_\_  
(3-digit code on back of card)

How did you hear about us? \_\_\_\_\_

**REFUND/CANCELLATION POLICY:** Enclosed is the enrollment fee paid in full, for the above named student. I understand that my entire fee, less a 20% non-refundable processing fee, will be refunded if such student cancels at least two weeks prior to the first day of camp. At any time after that date, I understand no refund will be made, but I will receive a credit, minus the 20% registration fee, for future instruction. I further understand there will be no refund or credit for days unattended by student. The Chicago Bulls/White Sox Training Academy reserves the right to cancel any camp or decline any application. Permission is given to use my child's photo, video or audio recording resulting from the Program for promotional purposes.

**WAIVER AND GENERAL RELEASE AND COVENANT NOT TO SUE:** As parent or legal guardian for \_\_\_\_\_ (the "Participant") I hereby give my consent to Participant's participation in the program (the "Program") to be conducted by the Chicago Bulls/White Sox Training Academy. I acknowledge that participation in the Program involves the risk of personal injury to Participant or others. Understanding that risk and in consideration of Participant being allowed to participate in the Program, I, on my own behalf and on behalf of Participant, Participant's heirs, administrators, executors, and assigns, hereby (i) fully release and discharge the Chicago Professional Sports Limited Partnership, Chicago Bulls Limited Partnership, and CBLIS Corporation, The National Basketball Association, and its team members, NBA Properties Inc., Roclax Athletic Instruction, LLC, Chicago White Sox Ltd., Chisox Corporation and all of its and their respective officers, agents, employees, shareholders, and partners and representatives, and any and all of their respective subsidiaries or affiliates (collectively the "Releasees"), from any and all claims, demands, liabilities, or causes of action of whatsoever kind or nature, in longevity or otherwise, which hereinafter may accrue against them and which in any way arise as a result of Participant's participation in the Program, regardless of whether based on fault or negligence of the Releasees, (ii) covenant not to sue any of the Releasees for any matter relating to Participant's participation in the Program, and (iii) indemnify, defend, and hold Releasees harmless from and against any and all losses, damages, costs or expenses (including attorneys' fees and other costs of defense) which any of them may sustain as a result of, or in connection with, Participant's participation in the Program. I have read this Waiver and General Release and Covenant Not to Sue and Refund/Cancellation Policy carefully and fully understand the contents. I am aware that this is an agreement not to sue the Releasees and constitutes a complete release of liability by me and by Participant in favor of the Releasees. I acknowledge that I am signing this document of my own free will, with full knowledge of the risks being assumed which include, without limitation, the risk of injury or death to Participant regardless of how it arises and even if it results from the negligence or fault of the Releasees.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_