

# ALLIE QUIGLEY CAMP REGISTRATION FORM

Complete a registration form and return with \$50 payment  
as indicated to:

Joliet Catholic Academy c/o Ryan Quigley,  
1200 N. Larkin Avenue, Joliet, IL 60435  
815.741.0500 | [www.jca-online.org](http://www.jca-online.org)

Participant: \_\_\_\_\_

School Attending: \_\_\_\_\_

2016-2017 Grade: \_\_\_\_\_

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

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

Home #: \_\_\_\_\_

Cell #: \_\_\_\_\_

Email: \_\_\_\_\_

Parent(s): \_\_\_\_\_

Camp: \_\_\_\_\_

Shirt Size (Circle One): YL XS S M L XL

*Walk-in registrations will be accepted the first day of camp.*

Payment (Circle One) Cash Check

Make checks payable to: **ALLIE QUIGLEY CHAMPIONS**

\* Contact Ryan Quigley at [rquigley@jca-online.org](mailto:rquigley@jca-online.org) for group/team rates and payment options or call 815.741.0500, ext. 214.

I hereby grant the Allie Quigley Champions permission to photograph/video my child and use any picture/video image as part of any promotion for camp or schools (JTHS/JCA). I would like to receive information from JCA, USF, JTHS, and Chicago Sky regarding basketball and athletics.

I authorize the camp coach and or JTHS/USF/Joliet Park District representative(s) to use their best judgment in seeking medical treatment for my child. I agree not to hold the school, AQ Champions, or anyone acting on their behalf responsible for any injury that may occur.

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

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