

# Catch the Stars MINI CLINIC

JOIN 3-TIME OLYMPIC GOLD  
MEDALIST & WNBA MVP  
**TAMIKA CATCHINGS**  
AND FRIENDS FOR A FUN-FILLED  
BASKETBALL CLINIC FOR BOYS & GIRLS  
AGES 10-13!!

**WHEN:** SATURDAY, APRIL 26TH FROM  
10AM-1PM (RIBBON CUTTING & CLINIC)

**WHERE:** CATCHINGS COURT @  
THATCHER PARK  
4649 W. VERMONT ST.  
INDPLS, IN 46222



**COST:** \$10/CAMPER  
INCLUDES CAMP TEE  
& 2 FREE TICKETS TO  
FEVER HOME OPENER  
VS MYSTICS (5/23)!!

LIMITED SPACE AVAILABLE!!

REGISTER ONLINE AT:  
**WWW.CATCHTHESTARS.ORG** OR BY  
COMPLETING THE FORM BELOW!



## MINI CLINIC REGISTRATION FORM

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE \_\_\_\_\_

ADULT T-SHIRT SIZE: (CIRCLE ONE) SMALL MEDIUM LARGE XL 2XL

SEX \_\_\_\_\_

AGE \_\_\_\_\_

PARENT OR GUARDIAN SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

I, THE UNDERSIGNED, SUBMIT THAT MY SON OR DAUGHTER IS PHYSICALLY FIT TO PARTICIPATE IN STRENUOUS ACTIVITY AND WAIVE THE CATCH THE STARS FOUNDATION, INDY PARKS, TAMIKA CATCHINGS, AND ALL SPONSORS FROM ANY AND ALL RESPONSIBILITY FOR INJURY OR ILLNESS. I HEREBY AUTHORIZE THE DIRECTORS OF THE CLINIC TO ACT FOR ME ACCORDING TO THEIR BEST JUDGEMENT IN AN EMERGENCY REQUIRING MEDICAL ATTENTION. I UNDERSTAND THAT I AM SOLELY RESPONSIBLE FOR THE PAYMENT OF ANY SUCH MEDICAL EXPENSES AND ACKNOWLEDGE THAT I HAVE MEDICAL AND ACCIDENT INSURANCE COVERAGE. I CONSENT TO THE CAMP AND THE CAMP PHOTOGRAPHERS TAKING AND/OR USING PHOTOGRAPHS OF MY CHILD FOR PROMOTIONAL/MARKETING PURPOSES.

MAIL FORM AND ENTRY FEE TO: CATCH THE STARS FOUNDATION, P.O. BOX 53557, INDPLS, IN 46253