

EXPOSURE CAMP

EXCLUSIVE EVENT FOR ALL HIGH SCHOOL JUNIORS AND SENIORS WITH AN INTEREST IN COLLEGE BASKETBALL
SATURDAY, APRIL 9 - NORTHWEST COLLEGE - CABRE GYM



EXPERIENCE A TEAM WORKOUT AND INTERACT WITH THE NORTHWEST TRAPPERS MEN & WOMEN'S TEAMS, WHILE BEING EVALUATED BY THE COACHING STAFF.

BONUS: LUNCH AND A TOUR OF THE BEAUTIFUL NWC CAMPUS WILL BE PROVIDED.

WHO & TIME: High School Junior & Senior Girls 8:30a-1:00p
High School Junior & Senior Boys 11:00a-3:00p

DATE: Saturday April 9, 2022

LOCATION: Northwest College Cabre Gym

FEE: \$25 Registration form and fee will be accepted the morning of camp,

ACCEPTED PAYMENT FORMS: Cash

Please include camper name with/on payment if submitted separate from registration form.

Venmo Boys: NWC Trapper Men's Basketball @nwctrappermbb
Girls: Coach Lauren Davis @northwestcollegewbb

Check Make checks payable to
Boys: NWC Trapper Men's Basketball
Girls: NWC Trapper Women's Basketball

MAIL REGISTRATION FORM TO: NWC Exposure Camp
Do not mail after April 2.
c/o Jay Collins (Men's Bball)
c/o Lauren Davis (Women's Bball)
231 W 6th Street
Powell, WY 82435

EMAIL REGISTRATION FORM TO: JAY.COLLINS@NWC.EDU
LAUREN.DAVIS@NWC.EDU

SATURDAY SCHEDULE
8:30A-9:00A GIRLS REGISTRATION/CHECK IN
9:00A-11:30A GIRLS WORKOUT (CABRE)
11:00A-11:30A BOYS REGISTRATION/CHECK IN
11:30A-12:15P LUNCH (WILL BE PROVIDED)
12:15P-1:00P CAMPUS TOUR
1:00P-3:00P BOYS WORKOUT (CABRE)

Please email JAY.COLLINS@NWC.EDU or LAUREN.DAVIS@NWC.EDU for more information or any questions/concerns.

NWC EXPOSURE CAMP 2022 - Registration Form

CAMPER'S NAME	SCHOOL	GRADUATING YR	
PARENT NAME	PHONE NUMBER		
ADDRESS	CITY	ZIP	
EMAIL			
FORM OF PAYMENT (Circle):	CASH	CHECK	VENMO
EMERGENCY CONTACT (if parent cannot be reached):	PHONE NUMBER		

I hereby the authorize the directors of the NWC Exposure Camp to act for me according to their best judgement in any emergency requiring medical attention and hereby waive and release NWC Exposure Camp, its directors and camp counselors, and Northwest College of all liability for any illness of the above participant, or injuries incurred at the camp.

PARENT OR GUARDIAN SIGNATURE

DATE