

Ladycat Basketball/Volleyball Camp



Girls Entering Grades 3-6
August 12th, 13th & 14th 2019
High School Gyms
9:00-12:00



***Cost: \$20 (includes t-shirt)**

Make checks payable to: Marcellus Community Schools

***Registration Deadline: August 9th, 2019**

Late Registrations will be accepted, but they will not be able to receive a t-shirt.

**Complete the attached registration and consent form on back
and bring with the first day of camp.**

Camp Info:

The girls basketball and volleyball programs will be hosting a 3 day camp for junior age girls. The camp will be broken down into two sessions, half will do basketball and the other half volleyball and then at the midway point the groups will rotate.

The camp is designed to introduce the sports to younger girls and develop fundamentals in the older age girls.

Questions... Contact:

Don Price

(269) 646-5081

don.price@marcelluscs.org

Ladycat Basketball/Volleyball Camp

Please Print. Do not include more than one participant per registration form.

Student's Name _____

Age _____ Grade (for 2019-2020 School Yr.) _____

Parent\Guardian's Name _____

Street _____ City _____ Zip code _____

Phone Number _____

Cell Number _____ Email _____

Emergency Information: If we cannot contact parents, call:

Name _____ Phone _____

Relationship _____

Family Doctor _____ Phone _____

PARENT/GUARDIAN CONSENT AND RELEASE

I, the undersigned parent and/or legal guardian of the minor named above do hereby consent to her participation in the 2019 Marcellus Ladycat Basketball/Volleyball Camp. I, as the parent and/or legal guardian of the minor, in considerations of the acceptance of this entry, with full understanding of the risk involved and to the maximum extent permitted by law, release, hold harmless, and agree to against any present or future claim, loss, or liability for injury to person or property which, I or the minor, may suffer, or for which the minor may be liable to any other person related to the minor's participation in the camp resulting from any cause, including but not limited to ordinary or gross negligence.

I HAVE READ THIS CAREFULLY AND KNOW IT CONTAINS A CONSENT AND RELEASE.

X _____
Signature of Parent or Guardian _____ Date _____

Name (Print): _____

CAMP ACTIVITIES INSURANCE WAIVER

I fully understand the Marcellus High School District does not provide health or life insurance coverage for the above named student while he/she is participating in camp activities. I/We further understand that it is my/our responsibility to provide adequate insurance coverage to the above named student.

X _____
Signature of Parent or Guardian _____ Date _____

Registration Fee: \$35 (including t-shirt)

Select a T-Shirt Size:

Youth S ___ M ___ L ___ XL ___ Adult S ___ M ___ L ___ XL ___

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