| | Date/Time | where | Age/grade entering | Cost | What to bring | Contact |
|-----|--|------------------------------|---------------------------------------|---------------------------|---|--|
| p | July 13 – 16 12pm – 2:30pm | WHS Field | 1-8 | \$85 | Gym shoes/cleats, gym shorts, t-shirt, water | Aaron Hancock 513-206-7050 ext. 7 hancocka@wyomingci |
| | July 22-26 8:30-10:30a | Tennis courts next to WHS | 6-1 | \$45 | Tennis shoes, water, any equipment available | Tami Prophater <u>tami.prophater@gm</u> |
| | July 7 - 10 9a-11:45 12:30-2:30p 3-5p | WHS gym | Freshman 7-8 Grade Grade school | \$80 \$70 \$70 | Gym/court shoes, water, knee pads if available. | Jim Delong jldvball2@aol.com |
| all | July 14 – 16 5pm – 7:30pm | WHS gym | 3rd-8th grade | \$50 | Gym/court shoes, water | Jermaine Issac jermainedisaac@gm |
| all | July 6 - 10 9a-12p 1-3p | Wyoming MS gym | 2-5 6-8 | <mark>\$80</mark> \$40 | Gym/court shoes, water | Matt Rooks <u>rooksm@wyomingc</u> |

gistration appreciated, but walk ups welcome!

WYOMING SPORTS CAMP REGISTRATION FORM

| Please check the | camp which you | r child will be | attending (| one registration | per camp): |
|------------------|----------------|-----------------|-------------|------------------|------------|
| | oump minen jou | | | | per eampj. |

| Football Camp Tennis | Volleyb | all | | | |
|-------------------------------|---------|-----------------|------------|------|-------|
| Girls' Basketball Boys' Baske | tball | | | | |
| Student's Name | | _Grade Entering | Fall 2020: | | |
| Address: Ph.:Cell: | _ City: | Zip:_ | Home P | 'h.: | _Work |
| E-mail: | | | | | |
| Parent(s) Name: | | | | | |
| T-Shirt Size:Y-SY-MY-L | | | | | |
| A-SA-MA-LA-XL | | | | | |

Please send registration and checks made payable to "Wyoming School Fund" to the appropriate address from the Coaches Contact Sheet (one check and one form for each camp). Multiple children from the same family going to the same camp can be on one form.

In Case of Emergency, please contact the following:

| Name: | Relationship: | _ Relationship: | | |
|------------|---------------|-----------------|--|--|
| Address: | | | | |
| Phone: (H) | . (W) | _ (C) | | |

Additional medical information to be aware of (allergies, medical conditions, etc):

WAIVER OF LIABILITY

I am sending my child to participate in this camp understanding the normal inherent risks for this type of activity. Wyoming City Schools and camp personnel will not be held liable in case of injury or harm sustained at this camp.

| Parent's Signature: | Date: |
|---------------------|-------|
|---------------------|-------|