



Hope Christian Schools, Inc.
 Mailing Address:
 8005 Louisiana Blvd., NE
 Albuquerque, NM 87109
 821-2513



For office use only:
 Amt Rec: _____ Ck # _____ Date: _____
 Camp: _____
 Imm Rec: _____ Ins. Information: _____

2011 ATHLETIC CAMP

Student Information: PLEASE PRINT!

IS THIS STUDENT ENROLLED FOR HOPE'S 2011 SUMMER CAMP: YES NO

Camper's Name: _____ Birth Date: _____ Grade next fall _____ Hope Student YES NO Sex M F
 Address: _____ City, State & Zip: _____

Insurance coverage on Camper is required. Hospitalization insurance is required for all participants. It must be a family-type policy and is the responsibility of each participant and parent.

Insurance Co.: _____ Policy #: _____ Patient #: _____
 Mother's policy? Father's Policy? Employer: _____

Doctor's Name: _____ Phone #: _____ Recommended Hospital: _____

List any **allergies or medical problems** the student may have: _____

List any medication that must be taken on a regular basis: _____

Immunization record is required. Registration will not be accepted without it. attached. Hope student-record on file.

Parent or Guardian Information:

Parent's Name: _____ Cell numbers: Mom _____ Dad _____
 Home Phone: _____ Father's Work Phone: _____ Mother's Work Phone: _____

Home Address: (if different from student)

_____ City _____ State _____ Zip _____

Person other than parent/legal guardian to be contacted in case of emergency: (List two. Must be local & from separate households.)

Name: _____	Relationship _____	Home Phone: _____	Work or cell Phone: _____
Name: _____	Relationship _____	Home Phone: _____	Work or cell Phone: _____

I, the parent or guardian of the above named camper hereby authorize the staff of Hope Christian Schools, Inc. to act according to their best judgment in any emergency requiring medical attention.

I hereby release Hope Christian Schools, Inc. and any representatives of the school from any liability or responsibility for injuries, damages or expenses that may occur to the above named camper arising from any camp activity and I agree to indemnify and save harmless Hope Christian Schools, Inc. and any representative of the school against any such claim for injuries, damages or expenses made by or on behalf of said subject.

I hereby waive and release the school from any and all liability for any injury or illness incurred prior to or while at the camp. I have no knowledge of any physical impairment that would be affected by the camper's participation in the camp program.

I understand that I am financially responsible for any damage done to or any part of the campus by the above camper.

I also acknowledge the school's charge of a \$20.00 fee for each notification of insufficient funds or returned check.

Signature of Parent or Guardian

Please Print Name

Date

Camp fee is non-refundable and due with registration. Space is limited. Registration is on first come/first enrolled basis. Registration received the morning camp begins will be charged a \$20.00 late fee.

Because Mid School Campers are off campus the majority of each day, it is difficult for them to attend Athletic Camps. Parents of Mid-School Campers will be responsible for getting them to the Athletic camp, and then picking them up afterwards. (They would not be able to join the other Mid-School Campers that day)

Girls

Girls Volleyball (Limit 50 per camp) Location: HS Gym



Cost	Camp	Ages	Date	Time					
_____ \$75	Advanced	11-15	May 31-June 3	1:00 - 4:00 pm					
_____ \$75	Beginning/Intermediate	6-11	May 31-June 3	9:00 - noon					
T-shirt included in registration. Please circle size needed:					Adult sizes:	S	M	L	XL

Girls Cheer (Limit 75) Location: HS Gym



Cost	Ages	Date	Time								
_____ \$65	5-16	June 13-15 (3 days)	9:00-noon								
T-shirt included in registration. Please circle size needed:				Youth	or	Adult	XS	S	M	L	XL

Girls Softball (Limit 25) Location: HCS softball field (Wyoming & Oakland behind Eagle Rock Church)

Cost	Ages	Date	Time								
_____ \$70	4th grade & up	July 18-21	6:00 - 8:30 PM								
T-shirt included in registration. Please circle size needed:				Youth	or	Adult	XS	S	M	L	XL

Girls Basketball (Limit 50) Location: HCS Gym



Cost	Ages	Date	Time					
_____ \$80	6-13	July 5-8	9:00 - 12 noon					
T-shirt included in registration. Please circle size needed:				Adult sizes	S	M	L	XL

Co-Ed

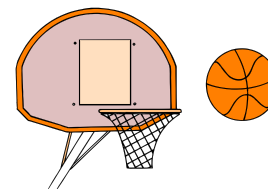
Soccer Location: HCS soccer field



Cost	Ages	Date	Time					
_____ \$80	K-5th (going into)	July 25-28(four days)	9:00 - 12 noon					
T-shirt included in registration. Please circle size needed:				Adult sizes	S	M	L	XL

Boys

Boys Basketball (Limit 60) Location: HCS Gym



Cost	Ages	Date	Time					
_____ \$80	6-10	June 20-23 (4 days)	9:00 - 12 noon					
_____ \$80	11 & up	June 20-23 (4 days)	1:00 - 4:00 pm					
T-shirt included in registration. Please circle size needed:				Adult sizes	S	M	L	XL

Parents: Keep this copy for your records!

Girls

Girls Volleyball (Limit 50 per camp) Location: HS Gym Coach: Jessica McCall, Phone: 401-0774

<u>Cost</u>	<u>Camp</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$75	Advanced	11-15	May 31-June 3	1:00 - 4:00 pm
_____ \$75	Beginning/Intermediate	6-11	May 31-June 3	9:00 - noon

Needed Equipment: Knee pads, water bottle with name on it

Girls Cheer (Limit 75) Location: HS Gym Coach: Rebecca Seaberg-Barnes, Phone: 554-9192

<u>Cost</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$65	5-16	June 13-15 (3 days)	9:00-noon

Snacks provided; bring own water bottle with name on it. Please wear modest shorts, short-sleeved T-shirt, athletic shoes with socks, hair up in ponytail. There will be a cheer performance for the parents by the girls the last day of camp at 11:30 AM.



Girls Softball (Limit 25) Location: HCS softball field (Wyoming & Oakland behind Eagle Rock Church)

Coach: Kent Gray Phone: 228-5729

<u>Cost</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$70	4th grade & up	July 18-21	6:00 - 8:30 PM

Needed Equipment: cleats, glove, sunscreen, visor-ball cap, water bottle w/name; if you have: bat, helmet, sliding gear



Girls Basketball (Limit 50) Location: HCS Gym Coach: Terry Heisey, Phone: 822-8868

<u>Cost</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$80	6-13	July 5-8	9:00 - 12 noon

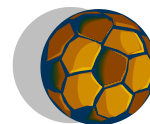
Needed Equipment: water bottle with name on it.

Co-Ed

Soccer Location: HCS soccer field Coach: Travis Dutton Phone: 822-8868

<u>Cost</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$80	K-5th (going into)	July 25-28	9:00 - 12 noon

Needed Equipment: water bottle with name on it; shin guards; sunscreen, cleats



Boys



Boys Basketball (Limit 60) Location: HCS Gym Coach: Jim Murphy, Phone: 822-8868

<u>Cost*</u>	<u>Ages</u>	<u>Date</u>	<u>Time</u>
_____ \$80	6-10	June 20-23 (4 days)	9:00 - 12 noon
_____ \$80	11 & up	June 20-23 (4 days)	1:00 - 4:00 pm

Needed Equipment: water bottle with name on it