

St. Dominic Savio Catholic High School 2019 Summer Athletics Camps Registration Form

updated 5/15/2019

Camp Name	Instructor	Dates	Time	Ages	Cost
Baseball Camp	Bryan Edwards	July 22-25	9:00 am-12:00 noon	Boys 9–14 years old	\$295
Girls Basketball Camp	Rich Carr	July 22-24	5:00-8:00 pm	Girls 9th-12th grades	\$75
Lone Star Hoops Basketball Ca	imp Jan Jernberg	June 17-20	8:30 am-4:30 pm	Girls/Boys 1 st -8 th grades	\$185
□ Soccer Speed & Strength	Steven Cardenas	June 3-July 31	5:00-6:00 pm (M/W)	Girls/Boys 7th-12th grades	\$100/mont
□ Speed & Agility	T&F Coaching St	aff July 8-10	4:00-7:00 pm	Girls/Boys 10–18 years old	\$100
□ Strength & Conditioning (HS)	FB Coaching Staf	f June 3-July 18	8:00-10:00 am (M/T/W/T	h) Girls/Boys 9th–12th grades	\$250
□ Volleyball Camp (MS)	Megan Leath	June 24-26	8:00 am-12:00 noon	Girls 6th–8th grades	\$165
□ Volleyball Camp (HS)	Megan Leath	July 24-27	8:00 am-3:00 pm	Girls 9th–12th grades	\$195
□ Volleyball Strength & Cond (H			9:00-11:00 am (M/T/W)		\$185
Student Name		Ag	geEnter	ing Grade	
Address S					
S	treet	Cit	ty State	Zip	
Mother/Guardian's Name					
Address				_	
(if different than student) S	treet	Cit	ty State	Zip	
Father/Guardian's Name					
Address				_	
(if different than student) S	treet	Cit	ty State	Zip	
Family Phone Number		Family E-	-mail		
Contact in Case of an Emergence	у				
-	Name	Re	lationship to Student	Phone Number	
Student's Signature			Date		
Mother's/Guardian's Signature			Date		
Father's/Guardian's Signature			Date		

Full payment must be received prior to the first day of camp. Please return this form and payment no later than Friday, May 31, 2019 to: St. Dominic Savio Catholic High School, Attention: Crystal Clark, 9300 Neenah Ave., Austin, TX 78717. For all Savio Camps, please make checks payable to St. Dominic Savio Catholic High School (SDSCHS); Lone Star Hoops payable to Lone Star Hoops. Some camps session sizes are limited, so placement will be determined on a first come, first serve basis.

Authorization/Medical Release By signing this form, I/we as parent(s)/guardian(s) give my/our permission for my child(ren) to participate in the 2019 St. Dominic Savio Catholic High School (SDSCHS) summer camp(s). I/we waive and release SDSCHS and the staff from any liability in the event of injury or illness to my child(ren). I/we hereby authorize the staff of the SDSCHS summer camp(s) to act for me according to his/her best judgment in any emergency requiring medical attention. I/we further understand that SDSCHS does not provide medical insurance covering injuries that might be incurred at the 2019 summer camps. I/we release SDSCHS and its camp staff from any and all claims resulting from participation in the 2019 summer camp(s).