

NOTRE DAME – CATHEDRAL LATIN SCHOOL

2010 SUMMER CAMP – REGISTRATION FORM

All Camps are determined by grade level for school year 2009-2010

PLEASE PLACE THE DOLLAR AMOUNT NEXT TO THE CAMP YOU PLAN TO ATTEND

All checks payable to: Notre Dame – Cathedral Latin School / NDCL

- _____ Girl's Fastpitch Camp – June 7 – June 11 – 8:30 am – 11:30 am - Cost \$110.00 (Limit 24)
(Grades 4,5,6,7 & 8)
- _____ Football Camp – June 15 – June 18 – 9:00 Am – 11:30 pm – Cost \$100.00 (NDCL)
(Grades 6, 7, & 8)
- _____ Boys Basketball Camp – June 21 – June 25 - 9:00am - 2:00 pm - Cost \$125.00 (McGarry Gym)
(Grades 4, 5, 6, 7, & 8)
- _____ Boys Baseball Camp – June 28 – July 2 – 8:30 am – 12:00 pm – Cost \$140.00 (NDCL)
(Grades 3, 4, 5, & 6)
- _____ Boys Baseball Camp – June 28 – July 2 – 1:00 pm – 4:30 pm – Cost \$140.00 (NDCL)
(Grades 6, 7, & 8)
- _____ Girls Tennis Camp – June 28 – July 2 – 9:00 am – 11:30 am – Cost \$90.00 (NDCL Courts)
(Grades 3, 4, 5, 6, 7, & 8) (\$160.00 for both weeks)
- _____ Girls Tennis Camp – July 5 – July 9 – 9:00 am – 11:30 am – Cost \$90.00 (NDCL Courts)
(Grades 3, 4, 5, 6, 7, & 8) (\$160.00 for both weeks)
- _____ Girls Basketball Camp - July 12 - July 16 - 9:00 am - 12:00 pm - Cost \$ 100.00 (McGarry Gym)
(Grades 4, 5, 6, 7, & 8)
- _____ Girls Volleyball Camp - July 19 - July 23 - 5:00 pm - 7:00 pm - Cost \$80.00 (McGarry Gym)
(Grades 4, 5, 6, 7, & 8)
- _____ TOTAL

All checks payable to: Notre Dame – Cathedral Latin School / NDCL

Please send application and check to: Notre Dame – Cathedral Latin School
Summer Camp Registration – Athletic Dept
13000 Auburn Road
Chardon, Ohio 44024

For Information: Frank Platzar – Athletic Director frank.platzar@ndcl.org – 440-286-6226 (215)

General Registration Information: Please complete a separate registration form for each attendee.

Last Name _____ First Name _____ Middle _____

Address _____ City _____

State _____ Zip _____ Email Address _____

Home Phone _____ Cell Phone _____

Emergency Phone #1 _____ (Contact Name) _____

Age _____ Grade in School (2009-2010 School Year) _____

T-Shirt Size: (Please Circle) (Youth) Med Large (Adult) Small Medium Large X-Large XX-Large

Camp Waiver: Must be completed, signed, and dated

I hereby affirm that my son/daughter has my permission to participate in the 2009 Notre Dame - Cathedral Latin School Camp program. _____ Sport/Sports. I also acknowledge that I will not under any circumstance hold NDCL, the Camp Directors, or any camp staff member liable for any injury which may occur during conduct of the camp. I have insurance for my son/daughter, or I will assume financial responsibility for any and all injuries to my son or daughter. I further acknowledge that there are certain inherent risks that accompany participation in sports and sports camps. In the event that attempts to contact me at the above numbers have been unsuccessful, I hereby give my consent to call: Dr. _____ preferred physician or Dr. _____ preferred dentist. In the event the designated practitioner is not available, please transport my child to _____ hospital or any hospital that is reasonably accessible.

Parent / Guardian Signature: _____

Date: _____