

# GISD ATHLETICS

## SUMMER 2018 YOUTH CAMPS



### 1 SOCCER 6/7 - 6/9

Grades: K-9th  
Time: 9am-11am  
Location: Leopard Stadium

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### 2 TENNIS 6/11 - 6/13

Grades: K-9th  
Time: 9am-11am  
Location: GJH Tennis Courts

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### 3 BASEBALL 7/9 - 7/11

Times: 9am-11am (K-4th)  
11:30am-1:30pm (5th-9th)  
Location: GHS New Locke field

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### CC YOUTH GOLF 6/4-6/6

Times: 9am-11am (K-9th)  
Location: Golf Course/Contact Coach Crutsinger at 940-636-9333 for registration or visit [www.goleopards.org](http://www.goleopards.org) for additional information

### 4 SOFTBALL 7/9 - 7/11

Grades: K-9th  
Time: 11:30am-1:30pm  
Location: GHS softball field

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### 5 BASKETBALL 7/16 - 7/18

Grades: K-9th  
Time: 11:30am-1:30pm  
Location: GHS gymnasium

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### 6 VOLLEYBALL 7/23 - 7/25

7/23: 9am-11am (K-6th)  
1pm-3pm (7th-9th)  
7/24-7/25: 11a-1p (K-6th)  
2p-4pm (7th-9th)  
Location: GHS gymnasium

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\*Grade levels reflect the 2018-19 school year. Camps for grades 7-9 are for GISD students only. **Each camp is \$30/\$40 for 2 siblings/\$50 for 3 siblings.** Discount does not apply for one student attending multiple camps. Make checks payable to GISD Athletics. Pre-registration encouraged, but not required. Walk-up registration available. **Please complete one form per camp,** separate from flyer, and return with payment to Gainesville High School at 2201 S. I-35, Gainesville, TX 76240 ATTN: Coach Polk or bring to camp. For questions, contact James Polk at 817-240-4951.

Student (1): \_\_\_\_\_ Shirt Size \_\_\_\_\_ Grade\*: \_\_\_\_\_ Camp #: \_\_\_\_\_

Student (2): \_\_\_\_\_ Shirt Size \_\_\_\_\_ Grade\*: \_\_\_\_\_ Camp #: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Parent Cell Phone: \_\_\_\_\_

Alternate Phone: \_\_\_\_\_ Total Paid\*: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

I, the Parent or Legal Guardian of the athlete named above, give my permission for this student to participate in the GISD Athletics camp(s). I, the Parent or Legal Guardian hereby waive and release any claim against GISD and coaches/directors involved for any injury suffered in connection with the camp. I, the Parent/ Legal Guardian ACKNOWLEDGE that I have carefully read and understand this waiver, grant release and permission for the above mentioned student to participate in the GISD summer camp(s).