

Camp of Champions

DESERT RIDGE CAMP OF CHAMPIONS APPLICATION

BASE CAMP PRICE: **\$350.00**

\$100.00 Deposit Due on 5/18/18

- Incoming Freshman Camp date July 15-19: _____ (Check Box)
- 10-12 Grade Camp date July 23-27: _____ (Check Box)
- \$100 Deposit due on or before 5/19/17
- All remaining fees are due on or before June 13th.
- Late Camp Fee \$400 (Cash or Money Order Only) if paying after June 15th

Athletes Name _____ Age _____

Parents Name _____ Parents Phone _____

Parents Email _____

Grade (Fall 2018) _____ School _____

Insurance Information

Insurance Provider _____

Policy Holder Name _____

Policy# _____ Phone# _____

Participants should be covered under their own insurance policies. It is understood that Gilbert Public Schools, Winslow School District, and Camp of Champions are released from any and all claims, demands, and causes of action whatsoever in any way growing out of or resulting from participation in, or in transit to or from, this football camp. I hereby authorize the Camp Directors to seek medical attention if such attention is warranted: All refunds are subject to a \$100 fee. No refunds after June 1st.

Parent Signature: _____ **Date:** _____



The Jaguar Football Staff is hosting the Annual Summer Strength and Speed Camp

WHEN: SUMMER: MAY 29th – JULY 18th
JV/Varsity: 6:00-8:30 am _____ (Check Box)
Frosh: 6:45-10:15 am _____ (Check Box)
 (No SS Camp June 22nd- July 8th)

WHERE: Desert Ridge High School

WHAT TO BRING: Cleats, Water, Heat Gear Shirt and Shorts

COST: **\$175.00** –Cash or Check. If paying by Check, make payable to Jaguar Strength and Speed Camp. All participants will receive a Heat Gear T-Shirt

All Deposits are due on 5/18/18 (\$100.00) Balance is due on first day of camp

Please turn into or bring the first day of camp

Desert Ridge High School
Attention: Coach Hathcock
10045 E. Madero Ave
Mesa, AZ 85209

For more information please contact Head Coach Jeremy Hathcock at: jeremy.hathcock@gilbertschools.net

Athlete's Name: _____

Parent Name: _____ Email: _____ Phone: _____

"As a condition precedent to participating in the Frosh Football Camp, I, as the parent and/or legal guardian of _____ agree to maintain health insurance for my son/daughter while he/she is a participant in the camp. If I do not agree to maintain health insurance form my son/daughter, I agree to purchase the student accident insurance policy offered by the camp through the school district" No refunds

Parent / Guardian Signature

Date

Paid: check _____ cash _____ **Make checks payable to Jaguar Strength and Speed Camp**