



GOLDEN DEMONS

MULTI-SPORT ACADEMY CAMP



JULY 8TH-12TH, FROM 9:00 AM TO 5:00 PM

GOLDEN HIGH SCHOOL, 701 24TH STREET

FOR KIDS IN KINDERGARTEN THROUGH SIXTH GRADE

- Well-rounded and fun-filled week of sports and activities
- Participants will be introduced to Basketball, Volleyball, Baseball or Softball, Ping Pong, Flag Football, Soccer, Golf and Lacrosse by a staff of coaches from Golden High School
- The young athletes will learn fundamentals of each sport and will alternate between indoor activities and more vigorous outdoor activities
- There will be transitions between activities – time for hydration, stretching and fun games
- Lunch is provided and will be a full hour long in our shady courtyard so the campers will be able to enjoy downtime and plenty of hydration, games, cooling off activities and motivational speakers
- Please apply sunscreen before arrival (We will reapply throughout the day)
- Dress in cool clothes that breathe – shorts, t-shirts, crew socks and all-purpose sports shoes. Camp T-shirt is included in the registration fee
- Check-in on the first day of camp will begin at 8:30 a.m.
- Thank you for your understanding and cooperation by picking up promptly at 5:00. Your son or daughter will be signed in and out
- If anyone else is to pick up your child, we will need that information in advance and will check IDs

REGISTRATION FORM

PARENT AUTHORIZATION

Camper's Name _____ Date of birth _____

School _____ Grade (as of Fall 2012) _____

Address _____

City _____ State _____ Zip Code _____

Home Phone or Primary Cell Phone Number _____

Printed Name of Parent/Legal Guardian (required) _____

E-mail _____

PAYMENT METHOD

Payment is due upon submission of registration. Duplicate this application as needed and return with your check, in the amount of \$200, made payable to "Golden High School Basketball" to: Monnie Barrett, 12680 Willow Lane, Lakewood, CO 80215.

EMERGENCY CONTACT(S)

Primary Contact Name: _____

Relationship to Camp Participant: _____

Day Phone: _____

Evening Phone: _____

Secondary Contact Name: _____

Relationship to Camp Participant: _____

Day Phone: _____

Evening Phone: _____

Please make certain that you have applied sunscreen thoroughly before your child's arrival. We will re-apply every two hours as needed, with *Neutrogena Ultimate Sports Sunblock SPF 70*. If your child requires a special product, please bring it on the first day, labeled with their name. Note that we will make every effort to prevent sunburn, but understand that there are variables that may be beyond our control.

WAIVER

We hereby authorize the camp staff to act for parent/legal guardian according to their best judgment in any emergency requiring medical attention. In case of an emergency, the parent/legal guardian will be notified immediately. The parent/legal guardian further agrees to waive and release Jefferson County Schools for any injuries, losses, or damage while at the camp from any and all liabilities therein. I/we fully understand that the Jefferson County Schools do not provide any accident or health insurance coverage while participating in the camp. I fully understand that it is my/our responsibility to provide insurance coverage for my son/daughter.

Date: _____ Signed _____