

## SUMMER CAMPS

<b>CAMP</b>	<b>GRADE ENTERING</b>	<b>DATES</b>	<b>TIMES</b>	<b>LOCATION</b>	<b>COST</b>
Boys Basketball	2-4	6-5 / 6-8	8 – 9:30am	MJHS	\$60
Camp code: <b>BBB</b>	5-8	6-5 / 6-8	9:30 – 11am	MJHS	\$60
Girls Basketball	2-5	6-5 / 6-8	8 – 9:30am	WC	\$60
Camp code: <b>GBB</b>	6-8	6-5 / 6-8	9:30 – 11am	WC	\$60
Cheerleading	2-5	6-5 / 6-8	10 – 11:30am	MJHS	\$60
Camp code: <b>CL</b>	6-8	6-5 / 6-8	8 – 9:30am	MJHS	\$60
Volleyball	2-5	6-5 / 6-8	11:30 – 1pm	MJHS	\$60
Camp code: <b>VB</b>	6-8	6-5 / 6-8	1 – 2:30pm	MJHS	\$60
Track	NO CAMP THIS SUMMER				
Camp code: <b>T</b>					

**CAMP FEES NON REFUNDABLE**

**MULTIPLE CAMP DISCOUNT:**

1 kid or 1 camp - \$60	Example:	
2 kids <b>same camp</b> - \$90	Jason & Bobby	BBB \$90.00
3 kids <b>same camp</b> - \$130	Mary	CL <u>\$60.00</u>
4 kids <b>same camp</b> - \$160		\$150.00 Total

Students Full Name:	CAMP CODE:	GRADE ENTERING:	SIZE FOR T-SHIRT
_____	_____	_____	T-shirt size: YL YXL AS AM AL AXL AXXL
_____	_____	_____	T-shirt size: YL YXL AS AM AL AXL AXXL
_____	_____	_____	T-shirt size: YL YXL AS AM AL AXL AXXL
_____	_____	_____	T-shirt size: YL YXL AS AM AL AXL AXXL

Parent Name: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Address: \_\_\_\_\_

I hereby grant permission to the Manhattan Jr. High staff to act accordingly in the event of an emergency. My child has had a recent physical and is fit according to our physician:

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Application form and money due back by: May 11, 2018**

**Make checks payable to: Manhattan Athletic Booster**