



High Point Christian Academy

SUMMER 2010 SPORTS CAMPS

Register Online or Return this Form

**REGISTRATION
FORM**

Return this form to the school office.
Make checks payable to High Point Christian Academy, noting Sports Camp.

CAMP	DATE	RISING GRADE	TIME	COST	SITE
Basketball, Co-Ed	<input type="checkbox"/> June 1-4	3-8	9:00-12:00	\$75	HPCA Gym
Basketball, Co-Ed	<input type="checkbox"/> July 19-22	K-4	8:30-12:00	\$75	HPCA Gym
Basketball, Co-Ed	<input type="checkbox"/> July 19-22	5-8	12:30-4:00	\$75	HPCA Gym
Football, Salt & Light*	<input type="checkbox"/> June 7-11	7-12	TBA	\$100	HP Athletic Complex
Football, Top Cat*	<input type="checkbox"/> June 14-18	PK-6	TBA	\$60	HP Athletic Complex
Kids Soccer, Co-Ed	<input type="checkbox"/> June 14-18	K-5	9:00-12:00	\$90**	Oak View Baptist
Soccer Academy, Co-Ed	<input type="checkbox"/> June 14-18	6-12	9:30-1:00	\$90**	Oak View Baptist
Cheerleading	<input type="checkbox"/> June 21-25	1-8	9:00-12:00	\$90	HPCA Gym
Softball	<input type="checkbox"/> July 12-15	2-7	8:30-12:00	\$75	Hasty Comm Fields
Volleyball	<input type="checkbox"/> June 14-17	5-8	9:00-12:00	\$75	HPCA Gym

*Football Camp Information flyers are online under Athletic News

**Soccer: Discount of \$15 if more than one camper per family

CAMPER'S NAME _____ **RISING GRADE** _____

ADDRESS _____

CITY _____ **STATE, ZIP** _____

PHONE _____ **EMAIL** _____

PARENT NAME _____ **CELL PHONE** _____

EMERGENCY CONTACT _____ **PHONE** _____

T-Shirt Size: Youth S, M, L; Adult S, M, L, XL

NOTE: Email is important for confirmation and any updates from the coach.

I give permission for my child to participate in the 2010 HPCA Cougar Summer Sports camps. I do not hold the school, any coach, or anyone helping with the camps responsible should my child be injured. My child is covered by health insurance. I understand that I will be notified before medical attention is given to my child.

Parent/Guardian Name

Date
