



Summer 2017

Earlham Cardinals Youth Athletic Camps

Running

Co-Ed, Grades 2-8
June 19-21 9:30-11:00AM
June 22nd 6PM (Meet)
Track

Cost: \$30

At the camp we will address basic running principles used in both cross country and track & field. In the event of inclement weather, the camp will be held indoors, meeting in the gym.

Coaches: Dion Braet, Jon Peterson, Dan von Rentzell, Marty Dalton, Tim Harskamp, Kayla Selby

Volleyball

Grades 3-8
July 31 & August 1
9:00AM-11:00AM
Competition Gym

Cost: \$20

Volleyball camp will focus on key volleyball skills such as: passing, setting, hitting, and serving.

Coaches: Mindy Harskamp, Janay Michel, Bailey Gulley, Kayla Selby

Football

Grades 3-6
August 19
9:00AM-12:00PM
Football Field

Cost: \$30

At the elementary camps, athletes will learn the fundamentals of the game on offense and defense as well as special teams.

Coaches: Chris Caskey, Cory Houghton, Justin Johnson, Kirk Gilson, Tim Harskamp

Basketball

The boys and girls basketball camps will be held in the fall. Information for these camps will be sent out at a later date.

Coaches:
Girls: Dion Braet, Jon Peterson, Bailey Gulley, Alli Waugh

Boys: Kevin Williamson, James Severson, Tim Harskamp, Mike Rogers, John Sneller

Additional Information/Camp Notes

- Dress your child for athletic participation appropriate for the camp.
- It is advisable for the student to bring his/her own water bottle to each camp.
- Parents are responsible for arranging transportation.
- If you have any medical concerns about your child, please communicate with the coach prior to the camp.

Please detach and return this form and registration fees (checks made payable to "Earlham Athletics") by Friday, June 2nd.

Student Name: _____ Grade: _____ (for '17-'18 school year)

Shirt Size: **Youth** S M L XL **Adult** S M L XL

Volleyball **Running** **Football**
(circle all camps the athlete will attend)

_____ has my permission to attend the camps indicated on the other side of this form. I understand the camp will not provide insurance and that I must provide coverage for my child. I release the camp staff and the Earlham Community School District from legal responsibility in case of injury, both now and in the future. I also give my permission for the camp staff to seek medical assistance for my child should the need arise.

Parent Signature: _____ Date: _____

In Case of An Emergency, contact:

Name: _____ Phone #: _____

Relationship: _____

Please drop off form in District Office or mail to: Chris Caskey, Athletic Director, PO Box 430, Earlham, IA 50072