



# YOUTH FIELD HOCKEY CAMP

**June 15th – June 18th 3:00pm-5:00pm**

(Parkway West Stadium Field)

Open to girls and boys who will be entering **3<sup>rd</sup> - 8<sup>th</sup> grade** in the fall of 2020 who want to learn this exciting game or improve their skills. We will focus on individual skill development and team concepts. Make sure to bring shin guards and water bottle. If you choose option A please remember to bring your stick.

Mail registration and check (made out to Parkway West Field Hockey) by **6/8/2020** to:

Parkway West Field Hockey/Dawn Callahan  
14653 Clayton Road  
Ballwin, MO 63011

Questions please contact Dawn Callahan: dcallahan1@parkwayschools.net

**Check will be held for deposit until the first day of camp**

Name of Camper: \_\_\_\_\_ Grade (Fall 2020) \_\_\_\_\_ School \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Address: \_\_\_\_\_ Zip code \_\_\_\_\_

**\*\*\* Please circle a T-Shirt Size\*\*\***

Youth: S M L Adult: S M L XL

**Please select which camp option you would like below**

\_\_\_\_\_ Option A (\$65): (includes ball, mouth guard and t-shirt)

\_\_\_\_\_ Option B (\$90): (includes composite stick, mouth guard ball and t-shirt)

Height (used to determine stick size) \_\_\_\_\_

### Medical Release

I hereby authorize the directors of Parkway West Field Hockey Camp to act for me according to their best judgement in an emergency requiring medical attention. I know of no mental or physical problems that might affect my child's ability to safely participate in this program. My child is covered by insurance and I will be responsible for any medical or other charges in connection with attendance at camp. I agree that my child must abide by the rules and regulations of this camp.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_