

## CAMP APPLICATION

Camper's Name: \_\_\_\_\_

Parents'/Guardians'

Names: \_\_\_\_\_

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

\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School: \_\_\_\_\_

Grade (2019-20): \_\_\_\_\_

Shirt Size (circle one):

YS YM YL AS AM AL

\_\_\_\_\_ Campers at \$50 each.

\_\_\_\_\_ Total Payment

Pre-registration with payment is due by:  
June 1, 2019

Please make checks payable to:  
Delone Catholic High School Athletic Association

All proceeds will benefit  
Delone Catholic High School Athletic Programs

Please mail completed application and payment to:  
Delone Catholic High School  
ATTN: Youth Tennis Camp  
140 South Oxford Avenue  
McSherrystown, Pa. 17344

For more information, please call:  
Coach Denise Dunn  
717-965-9697  
tennis55@comcast.net



DELONE CATHOLIC HIGH SCHOOL  
ATTN: Tennis Camp  
140 South Oxford Avenue  
McSherrystown, Pa. 17344

For more information, please call or email:  
Coach Denise Dunn  
717-965-9697  
tennis55@comcast.net



## 2019 SQUIRE SPORTS CAMPS

For Boys and Girls  
Ages 6-15

June 10-14, 2018  
4:30-6 p.m.  
at the  
Tennis Courts  
at

604 West Hanover  
Street, Hanover, Pa.

# TENNIS

# TENNIS SKILLS CAMP

This camp is for boys and girls from ages 6-15 who are interested in learning or improving their tennis skills and preparing to play high school tennis.

## COACHING STAFF

Head Coach  
Denise Dunn

Coach Dunn is the Delone Catholic boys' and girl's tennis coach. She is certified by the United States Tennis Professional Tennis Association.

Additional staffing provided by Delone Catholic varsity tennis players.

## COST

(includes camp t-shirt)

\$50 per camper

## EQUIPMENT

Campers should bring a water bottle. Tennis racquets will be made available, if needed.

## REGISTRATION

Fill out the attached application and return with payment by June 1, 2019 to:

Delone Catholic High School  
ATTN: Tennis Camp  
140 South Oxford Avenue  
McSherrystown, Pa. 17344

## MEDICAL WAIVER

I, the undersigned, hereby expressly and affirmatively state that I wish for my child,

\_\_\_\_\_ to participate in the Squire Sports Camp. I realize that my child's participation in this activity or the use of equipment involves various risks of injury. In consideration of being allowed to participate in the activities and programs provided through Delone Catholic High School, I do hereby waive, release and forever discharge Delone Catholic High School, and all of its directors, officials, agents, employees, representatives, event staff and all other affiliates from any and all responsibility or liability for injuries or damages resulting from this activity. I do also hereby release all of those mentioned, and any others acting upon their behalf, from any responsibility or liability for any injury or damage to my child, including those caused by the negligent act or omission of any of those mentioned or others acting on their behalf, or in any way arising out of or connected with my child's participation in any of the contemplated activities or in the use of equipment through Delone Catholic High School, or otherwise.

My child is in good health and is able to participate in camp activities without restrictions. I certify that I have health insurance coverage which will be applied in the event of an injury. I will be responsible for any expenses incurred due to injuries and medical treatment.

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

Date: \_\_\_\_\_

Insurance Company Name: \_\_\_\_\_

Policy #: \_\_\_\_\_