

## CAMP APPLICATION

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

Date of Birth: \_\_\_\_\_

Gender: \_\_\_\_\_

Parents'/Guardians'

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

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

\_\_\_\_\_

\_\_\_\_\_

Cell/Home Ph: \_\_\_\_\_

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

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

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

Shirt Size (circle one):

XS S M L XL

\_\_\_\_\_ \$50 Registration fee prior to May 17.

\_\_\_\_\_ \$60 Registration fee after May 17

\_\_\_\_\_ Total Payment (fee includes 3k / 5k  
Registration - please circle one)

Pre-registration with payment is due by:  
May 17, 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: Cross Country Camp  
140 South Oxford Avenue  
McSherrystown, Pa. 17344

For more information, please call:  
Athletic Department  
717-637-5969 Ext. 213

# SQUIRE



# STRONG

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

For more information, please call:  
Athletic Department  
717-637-5969 Ext. 213



## 2019 SQUIRE SPORTS CAMPS

For Boys and Girls  
Entering  
Grades 5-9

Wed., May 29  
5:15-6:45 p.m. at DCHS

Thurs., May 30  
5:15-6:45 p.m. at DCHS

Fri., May 31  
5:15-6:45 p.m. at  
Codorus Marina

Sat., June 1  
3k/5k Registration  
8-9:45 a.m.  
3k/5k starts at 10 a.m.

# CROSS COUNTRY

# CROSS COUNTRY SKILLS CAMP

- Understanding core running skills
- Injury prevention
- Breathing patterns
- Nutrition and hydration information for athletes
- Specific race day preparation
- Discussion of race strategy
- How to recover from difficult workouts
- Approaches to running hills

## COACHING STAFF

### Head Coach

R.C. Zinn

### Assistant Coaches

Kristy Allen

Shawn Coleman

Courtney Cox

Dusty Lehr

Rex Walter

Additional staffing provided by the Delone Catholic cross country team.

## COST

(includes 3k/5k registration and T-shirt)

\$50 per camper (prior to May 17)

\$60 per camper (after May 17)

## EQUIPMENT

Shirts, shorts, and sneakers should be worn each day. Campers should bring a water bottle.

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