

Elkhart Christian Academy – Summer Sports Camps 2011

Camp	Grade Next Year	Dates	Time	Location	Regular Rate	Early Bird Rate	Early Bird Due Date
Soccer, Boys & Girls	1 st – 8 th	June 6 - 9	9am - 12pm	ECA Soccer field	\$60.00	\$50.00	June 1
Cross Country Boys & Girls	3 rd – 8 th	June 13 - 16	9am – 11am	ECA Rock, by east door	\$40.00	\$35.00	June 1
Basketball, Boys	Kind – 5 th	June 20 - 23	1:30pm – 2:30pm	ECA Main Gym	\$30.00	\$25.00	June 1
Basketball, Boys	6 th – 9 th	June 20 - 23	2:45pm – 4:30pm	ECA Main Gym	\$40.00	\$35.00	June 1
Basketball, Girls	4 th – 8 th	June 20 - 23	11a.m – 1p.m.	ECA Main Gym	\$40.00	\$35.00	June 1

* Early Bird Registration = receive a discounted rate. **All registrations after June 1st will pay the regular rate.

Please complete one registration form for each camper.

Be sure to check all camps that your camper will be attending and select the t-shirt size.

All campers will receive a t-shirt at each camp.

Please make (total payment) check payable to and return completed registration form to:

Elkhart Christian Academy, 25943 CR 22 E. Elkhart, IN 46517

Questions? Contact: Tammy Walters, Athletic Dept., Asst. - 293-1609 x19

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ECA SUMMER SPORTS CAMP - REGISTRATION FORM

EARLY BIRD REGISTRATION DEADLINE JUNE 1, 2011

Student's Name (#1) _____ Grade _____

Parents'/Guardians' Names _____

Address _____ City & Zip _____

T-Shirt size adult : Small Medium Large X Large
youth: Small Medium Large X Large

Please check which session(s) taking:

- Soccer ___ Boy Soccer ___ Girl Cross Country
- Basketball ___ Boy(k-5) Basketball ___ Boy(6-9) Basketball ___ Girl

Parent's/Guardian's Signature of consent to participate

Date

ECA Office Use Only

Date Rec'd _____ Amount Due _____

Deposit _____ Shirt Ordered CPU

CAMP

WHAT TO BRING

REPORT TO / CONTACT

Soccer - Boys & Girls: We will be teaching campers the basics of the game, focusing on proper technique and skills through drills and scrimmages to help them excel at their age level. Coaches Brown, Simon, Shelner, and Deardorff will lead the camp with the assistance of players from the boys and girls high school teams.

Soccer cleats, shin guards, indoor gym shoes, water bottles, snack, and sun screen is recommended.

ECA, Benjamin Brown
cell# 574-215-0014

Cross Country - Boys & Girls: The high school coaching staff will be leading the camp with the assistance of the Varsity and JV players.

Running shoes, water bottle

ECA, Peter Casaletto
cell# 574-361-8775

Basketball – Boys: Learn, develop, and practice basketball skills the ECA way! In addition to fundamentals, the 6-9th grade campers will learn offensive and defensive concepts that will enhance their middle school and high school play. The camps will be led by members of the high school coaching staff and team. Camp also includes contests, games, awards, and LOTS OF FUN!

Non-Marking gym shoes, socks, shorts, & a t-shirt

Ryan Culp
Varsity Boys Coach
cell# 574-215-0702

Basketball – Girls: Offensive and defensive fundamentals are the focus of this year’s camp. The girls will be taught how to correctly perform the building blocks of basketball using simple drills they can continue to practice at home. The camp and drills will help form a solid foundation to improve their game at the middle school level. The high school coaching staff will be leading the camp with the assistance of the Varsity and JV players. Camp also includes daily prizes, and participation in Mad Hair Day and Crazy Outfit Day.

Non-Marking gym shoes, socks, modest shorts & t-shirts. Water bottles & hair bands also recommended.

Todd Feenstra
Varsity Girls Coach
cell# 574-217-2162

ECA SUMMER SPORTS CAMP

Injury Statement:

I, _____, give my permission to the athletic trainers and coaches to
parent or guardian

treat _____ in case of accident or injury. I fully understand that they will, *student/participant* to the best of their ability, assess and treat the injury or sickness. I also understand that by signing this statement I waive all responsibility of accident, injury or sickness against Elkhart Christian Academy.

Signature of Parent or Guardian

Date

Insurance Statement:

Name of Policy Holder _____

Insurance Company _____ Policy Number _____

Contact Numbers:	Work #	Cell Phone #	Email
Mother's _____	_____	_____	_____
Father's _____	_____	_____	_____

List any medical conditions of which we should be aware.