



McCallum High School Athletics 2017 Summer Speed & Strength Camp

When: June 12 - June 29 & July 10 - July 20 & July 31 - August 3

Camp is six weeks total with off-weeks July 3 - July 7 & July 24 - July 28. Camp will be Monday - Thursday each week. There will be two separate sessions every day.

1st Session: 8 a.m. – 10 a.m.

Designed for all male athletes currently enrolled at McCallum High School

2nd Session: 10 a.m. – 12 p.m.

Designed for incoming freshmen, future Knights and female athletes currently enrolled at McCallum High School

Mail or Drop-off Forms & Fees to:

McCallum HS Athletics
Speed & Strength Camp
Coach G/ Fieldhouse
5600 Sunshine Dr.
Austin, TX 78756

Where: McCallum High School Fieldhouse

What I Need: Athletic Attire and Camp Fee

Athletic Attire:

Athletes should wear clothing which is appropriate for indoor/outdoor exercise and closed-toe shoes. In addition to these items, athletes may wish to bring a pair of cleats, towel and water.

Fees:

The cost for the entire six-week camp is \$50. Cash or check only. Make checks payable to *McCallum Football*. Partial or weekly payments are not accepted. Camp fees can be waived for participants who qualify for free/reduced lunch. Waiver forms are available in the McCallum Athletics office.

Questions: E-mail Coach G at Thomas.Gammerdinger@austinisd.org

<-----DETACH HERE----->

Athlete will attend (circle one): **1st Session: 8 a.m. – 10 a.m.** or **2nd Session: 10 a.m. – 12 p.m.**

Name: _____ Age: _____

Address: _____ Incoming Grade: _____

Email: _____ Phone: _____

Emergency Contact: _____ Phone: _____

Permission and Waiver of Liability:

I, as the parent or guardian of _____ do hereby give permission for my child to participate in the Summer Speed and Strength Camp at McCallum HS. I acknowledge that my child is physically able to participate in all camp activities. I hereby release and forever discharge McCallum HS, AISD, its employees, agents, and contractors in both their public and private capacities from any and all liability, claims, suits, damages or cause(s) of action whatsoever for any property damage or personal injury sustained by my child that may arise as a result of his/her participation in camp activities. I also give my permission for any emergency medical care to be given to my child that may be required as a result of any injury from participation in camp activities.

Parent/Guardian Signature

Date

Office Use Only		
Physical?	Yes	No
Amount Paid :	_____	