

# SUMMER CAMP

PRESENTED BY:



July 6<sup>th</sup>-10<sup>th</sup>

July 13<sup>th</sup> – 17<sup>th</sup>

July 20<sup>th</sup>-24<sup>th</sup>

July 27<sup>th</sup>-31<sup>st</sup>

**9:00 am – 1:00pm**

**Place: Stotzky Park**

## Camp Details:

You must sign up to reserve your spot.

Walk ups will be accepted if we have room.

We will sell out!

AGES 8-14

Bring your gear, drinks and a lunch

Player's Name: \_\_\_\_\_

Parent's Cell Phone #: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

**Please complete above registration & make checks payable to:**

**The Cage Sports Development Center**

**Mail to: 22 Williams Way South, Calverton, NY 11933**

**or register in person at:**

**THE CAGE – Sports Development Center**

**419 Osborn Ave. Riverhead, NY 11901**

**Conditions of attendance:** In consideration of The Cage Sports Development Center allowing my child to attend, I (we), individually and as legal guardian(s) (and/or) parent of: \_\_\_\_\_ (Child's Name) a minor, ("my child"), do hereby release, discharge, indemnify and hold harmless The Cage – Sports Development Center LLC. and its owners, directors, officers, employees, agents, successors, and assigns from and against, and waive any and all claims or liabilities for, any injuries, losses or damages, including without limitations, injuries to my child, myself and/or property, arising out of or incident to my child's participation in The Cage Sports Development Center's camp to act for me according to their best judgment in any medical emergency for my child. I also agree to be added to The Cage email list for future specials, programs, camps/clinics and leagues.

Date: \_\_\_\_\_ 2020

Parent / Legal Guardian's Signature \_\_\_\_\_