



Little Players Sports Camp



Purpose: Little Players Sports Camp is being offered for the purpose of developing student’s skills in the sports listed below. While receiving personalized instruction from camp staff your student will also understand how to handle winning and losing in a sportsmanlike and Christ honoring way. Each day the students will have a chance for fellowship with their old and new friends by eating together at the end of each day.

Location: Oakland Christian School (Clarkston Campus)
6300 Clarkston Road
Clarkston, MI 48346

Time: Monday – Thursday (9am-1pm)

Age: Kindergarten – 3rd Grade

Lunch: Bring your own lunch and eat with your buddies.

Weekly Cost: \$50/student (You may pick and choose which weeks you’d like to sign up for)
Make Checks payable to: **Oakland Christian School.**
Return Forms and payment to:
Oakland Christian School
Dennis Hopkins
3075 Shimmons Road
Auburn Hills, MI 48326

Schedule: (Please check the weeks your child will be attending)

Week	Sport	Attendance
6/7 through 6/10	Different Sport each day	
<i>6/14 through 6/17</i>	<i>Basketball at Auburn Hills Campus (K-2)</i>	
6/28 through 7/1	T-ball	
7/12 through 7/15	Soccer	
7/26 through 7/29	Backyard Games	

Medical Release & Emergency Contact Information

Personal Information

Name:		Grade:	
Address:			
City:		State:	Zip:
Phone:		Email:	

Medical Information

Allergies or Known Medical Conditions: (Please list or explain)	
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Emergency Contact Information

Emergency Contact:	
Home Phone:	
Work Phone:	
Cell Phone:	
Parent/Guardian Name(s):	
Family Physician:	
Physician's Phone:	

Insurance Information

Insurance Carrier:	
Policy Number:	

I, _____, parent or guardian of _____ recognize that as a result of athletic participation, medical treatment on an emergency basis may be necessary, and further recognize that school personnel may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under then-existing circumstances and to assume the expenses of such care. By signing, I release Oakland Christian School, its employees and volunteer representatives from liability for personal injury, property damage, or loss.

Signature: _____ Date: _____