

Mini-aux Camp

All 6th and 7th girls

July 16-20

9am-12noon

\$35

A chance to learn the basics:

Flags

Baton

Pompoms

Perform with the Marching Flyers

September 29 (7th grade band night)

October 29 (Marching Band Concert)

May 27 (Memorial Day Parade)

July 4 (Parade)

*additional practice Wednesdays 3:30-4:15

*must attend camp to perform

Camper's Name: _____ Grade in 2018: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____

Consent to Treatment:

In partial consideration of my child's acceptance into the St. Paul Camp, I/We as parents and/or legal guardians of _____ do hereby agree to waive all liability of St. Paul Mini Aux. Camp, Norwalk Catholic School employees and staff and the Diocese of Toledo for any accident, injury, (including death) illness or any other mishap which might befall the above-named camper while traveling to and from, or during her attendance at the St. Paul Basketball Camp. Further I/we hereby grant permission to the staff of St. Paul High School or any medical or surgical consultant deemed advisable, and any hospital to render to the above named camper any medical or surgical treatment that they deem necessary. I/We understand that all possible effort will be made to inform me/us in case of such treatment.

Parent or Legal Guardian's Name Signature

Phone (cell/home) Phone (work Phone (emergency)

Camper's Health Form:

Please circle any of the following conditions: asthma, bleeding disorders, convulsions/seizures, diabetes, head injuries/concussions, heart disease, and rheumatic fever.

Allergies to drugs: _____ Allergies to Food: _____

Last Tetanus Shot: _____ Physical Restrictions: _____

Current Medications:

Chronic or Recurring Illnesses:

Operations/Injuries:

Physician's Name: _____ Phone Number: _____

Dentist's Name: : _____ Phone Number: _____

Medical insurance: _____ Policy Number: _____

Tami Lynne Clark 440-714-1347
tclark@ncsmail.org
Register by June 30, 2018

Application, Consent to Treatment and the Health Form must be completed and sent with full payment to: St. Paul High School

Attn: Tami Clark
93 East Main Street
Norwalk, Ohio 44857

Please make all checks payable to: **St. Paul High School.**