

2011 MVPS ATHLETIC CAMPS REGISTRATION FORM

PLEASE REGISTER ONLINE AT WWW.MOUNTVERNONSCHOOL.ORG OR

COMPLETE THIS REGISTRATION FORM WITH ALL INFORMATION AND RETURN IT WITH ALL FEES BY MAY 13 TO:

Mark Heiser Mount Vernon Presbyterian School 510 Mount Vernon Highway Atlanta, Georgia 30328

Telephone: 404 252 3448 ext. 2266 Email: mheiser@mountvernonschool.org

A student who registers and then wishes to withdraw from the course or camp will be entitled to a 50% refund of fees prior to May 31, 2011. After May 31, 2011 all fees become non-refundable.

Check enclosed for \$ _____ to cover the fees for above chosen programs. _____

Student Name _____ Rising Grade _____

Parent/Guardian _____ Cell Phone _____

Home Address _____ Email _____

Emergency Contacts if parent(s) are unreachable:

Name _____ Relation _____ Phone _____

Name _____ Relation _____ Phone _____

Please check the program(s) for which you wish to register:

SUMMER SPORTS CAMPS

MUSTANG BOYS' BASKETBALL CAMP JUNE 6-10 *RISING GRADES 7-12 ELIGIBLE* \$220

MUSTANG BOYS' BASKETBALL CAMP JUNE 20-24 *RISING GRADES 2-8 ELIGIBLE* \$220

MUSTANG GIRLS' BASKETBALL CAMP JULY 20-24 *RISING GRADES 2-8 ELIGIBLE* \$220

MUSTANG BASEBALL CAMP JULY 25-29 *RISING GRADES 2-8 ELIGIBLE* \$220

MUSTANG CO-ED SOCCER CAMP JUNE 6-10 *RISING GRADES 1-8 ELIGIBLE* \$220

VOLLEYTOTS JULY 11-15 *RISING GRADES K-3 ELIGIBLE* \$130

OUTDOOR GRASS CAMP JUNE 6-8 *RISING GRADES 7-12 ELIGIBLE* \$80

INDIVIDUAL SKILLS VOLLEYBALL CAMP JUNE 13-17 *RISING GRADES 7-12 ELIGIBLE* \$220

BEGINNERS VOLLEYBALL CAMP JULY 11-15 *RISING GRADES 4-6 ELIGIBLE* \$130

MUSTANG FOOTBALL CLINIC JULY 18-22 *RISING GRADES 1-8 ELIGIBLE* \$220

MUSTANG CHEERLEADING CAMP JUNE 6-10 *RISING GRADES K-8* \$220

INJURY WAIVER: I agree to place my child in the summer camps being offered on the campus of Mount Vernon Presbyterian School. In placing my child in the aforementioned camp(s), I realize there is a risk of injury. I agree to provide transportation to and from the camp(s), and I further agree to hold camp directors, camp staff, Dr. Brett Jacobsen, Mount Vernon Presbyterian School and Mount Vernon Presbyterian Church staff harmless for any claims resulting from injury in the program provided. I know of no medical reason that should prevent my child from participating in the camp(s).

Parent/Guardian Signature _____ Date _____

See www.mountvernonschool.org for additional forms as well as the School's summer arts and academic programs.