**Chippewa Valley Girls’ Softball Summer Camp**

**Camp** **Dates**: June 21 & 22, 2017 \*Camp will be extended to June 23rd if there is inclement weather. Please check CVHS softball website for updated information.

**Eligibility**: Students entering 5th-9th grades **Time**: 8:00 AM-11:00 AM (Check-in 7:30am on Wednesday)

**Camp** **Director**: Claire Kapral, Chippewa Valley Varsity Softball Coach, ckapral@cvs.k12.mi.us

**Camp** **Focus**: This camp will focus on the basic fundamentals, skills, and strategies of softball.

**Required** **Equipment**: Each girl MUST provide her own fielding glove and water. Please wear cleats if available or tennis shoes.

Additionally, please make sure to eat breakfast and drink water before showing up to the field! It is encouraged to wear sunscreen, a hat, and sunglasses. CVHS is not responsible for lost or stolen items.

**Cost**: $65.00 per participant, $50.00 for each additional sibling from the same household. Price includes t-shirt.

Payment must be made online at <https://onlinereg.cvs.12.mi.us> OR Chippewa Valley Schools (in person or via mail) 19230 Cass Avenue, Clinton Township, MI  48038. Please return payment and registrations **no later than June 5, 2017**. Please detach bottom and submit personal information for each registrant and include with payment. A $20 fee will be assessed for any returned checks. Withdrawals prior to June 10 will be a full refund less a $8.00 processing fee. Withdrawals between June 13 – June 17 are refunded at 50%. No refunds will be given on or after June 21. Make check payable to Chippewa Valley Schools. Payment is DUE IN FULL at time of registration. Cash, check VISA, or Mastercard are all acceptable payment methods.

Check-in will begin at 7:30 AM. Report to the varsity softball diamond which is located off of Greenfield, behind the football stadium, and in-between the fire station and varsity baseball diamond.

Coaches CANNOT accept registration payments

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**Registration #: 846007-01**

Chippewa Valley Softball Clinic: June 21 & 22, 2017

Cost: $65.00 per participant, $50.00 for each additional sibling from the same household. Price includes t-shirt.

Participant’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB:\_\_\_\_/\_\_\_\_/\_\_\_\_\_\_\_ Current Grade:\_\_\_\_\_\_\_

Parent Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ T-Shirt Size (Circle one) YS YM YL AS AM AL

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Method of Payment: (Please circle one): Cash Credit Check

Check #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VISA/MC #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name as it appears on card:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Exp. Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_