

*B.C.S. Athletic Department*

**TrainAnd Conditioning**

*Summer Program*

Our Training And Conditioning program is designed to challenge and train Bracken athletes physically and mentally. The summer long camp will work on strength training, endurance, speed, agility, coordination, and overall physical development. Catz Sports will be running the program for the duration of the summer and conducting all session here on the Bracken campus.

**Ages:** Incoming 7<sup>th</sup> – 12<sup>th</sup> graders for 2009-10  
**Dates:** June 1<sup>st</sup> – July 23<sup>rd</sup>, Mondays and Thursdays  
**Times:** Girls – 9:00 a.m. – 10:00 a.m.  
Boys – 10:15 a.m. – 11:15 a.m.  
**Cost:** \$100.00 per student

Students Name: \_\_\_\_\_ Grade for 2009-10: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Students Cell: \_\_\_\_\_

Parents Cell: \_\_\_\_\_ Emergency Number(s): \_\_\_\_\_

Person to contact in an emergency (same as above number): \_\_\_\_\_

**The following statements must be read carefully and signed by parent or guardian:**

I understand that this camp is a program of Bracken Christian School and its athletic department. I also understand that all fees and costs related to the camp are non-refundable once the student has enrolled and/or started participating in the camp / program.

I hereby give my child permission to participate in the Bracken Christian School Training And Conditioning program. This authorization shall waive, release, and absolve Bracken Christian School and its camp staff from any and all liability for injury or illness incurred at the camp. I also give the camp permission to act for me according to its best judgment in any emergency.

I also certify that \_\_\_\_\_ has no physical problems which would impede his/her participation in this program other than those noted on an attached separate sheet of paper (as necessary).

Signature: \_\_\_\_\_ Relationship to child: \_\_\_\_\_