



**summer
CAMP**



ARRUPE JESUIT BASKETBALL CAMP

Arrupe Jesuit High School invites middle school boys and girls to our summer basketball camp! Join Arrupe Jesuit's boys and girls basketball teams for
FUNdamental drills and 3-on-3 tournaments.

Limited Spots available - Sign up today!

Registration forms available at www.arrupejesuit.com

Questions?

Contact Athletics (303) 455-7449 x230 or AJ Admissions (303) 455-4661

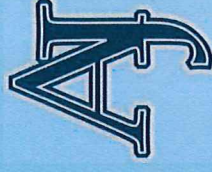
RISING 7TH, 8TH, & 9TH GRADERS

June 5th – June 7th
9:00am to 3:00pm

Grades: Rising 7th, 8th and 9th grade boys and girls

Location: Arrupe Jesuit High School

Cost: \$45 (includes lunch and practice jersey)





AJHS Generals Summer Basketball Camp

Wednesday, June 5	9:00am – 3:00pm
Thursday, June 6	9:00am – 3:00pm
Friday, June 7	9:00am – 3:00pm

Our pre-season camp is the perfect time to improve your basketball skills on the court, and fitness level off the court. Led by the AJHS head coach, Mrs. Orozco and student athletes. This is also a great opportunity to meet the team before winter tryouts.

The camp is open to rising 7th, 8th, and 9th grade girls and boys with an interest in attending Arrupe Jesuit High School. The cost is \$45 for all who submit their form and payment by June 1, 2019. Payment includes daily lunch and a camp T-shirt. Payments can be made in cash or check. Checks should be made out to Arrupe Jesuit high school. Payments can be mailed to 4343 Utica Street, Denver, CO 80212.

Questions? Contact:

Coach Hynes at shynes@arrupemail.org

Athletic Director - Mr. Lovinguth at 303-455-7449 ext 230

Admissions Director - Maria Orozco at 303-455-4661 *Hablo español

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AJHS Generals Summer Basketball Camp Registration

Name: _____

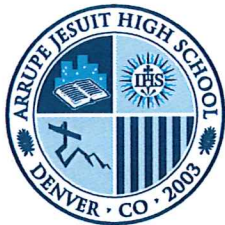
Email: _____

Medications or health conditions: _____

Food Allergies: _____

Code of Conduct:

Each camper is expected to follow all rules and respect all counselors. Blatant disrespect or a violation of our rules will result in disciplinary action. If a camper shows that they are unable to follow the rules of the Arrupe Jesuit basketball program, they will be removed from the camp ***without a refund.***



Arrupe Jesuit Summer Basketball Camp Consent Form

I understand and acknowledge that participation in the Arrupe Jesuit Summer Basketball Camp involves inherent risks of injury to my child. I authorize the Designated Coach/Supervisor (s) of Arrupe Jesuit High School to authorize and consent to any medical care for my child that he or she reasonably believes necessary, including, but not limited to, hospitalization or surgery. I agree to pay any expenses related to such medical care. I understand and acknowledge that the Designated Coach/Supervisor(s) of the Arrupe Jesuit Summer Basketball Camp will attempt to obtain my permission by telephone before authorizing or consenting to any medical care for my child if time and conditions permit.

I understand and acknowledge that any medical expenses related to illness or injury to my child while on the Arrupe Jesuit Summer Basketball Camp are not covered by any insurance program maintained by Arrupe Jesuit High School, and that I am primarily responsible for such expenses.

As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above named minor (child).

I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend the above-named school, its officers, directors and agents, chaperons, or representatives associated with the event, arising from or in connection with my child attending the event or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the school, its officers, directors and agents, chaperons, or representatives associated with the event for reasonable attorney's fees and expenses arising in connection therewith.

I hereby consent to my child's participation in the Arrupe Jesuit Summer Basketball Camp. I have carefully read this Arrupe Jesuit Summer Basketball Camp Authorization, and I understand and agree to each of the covenants and conditions set forth above.

Date

Emergency Phone

Parent or Guardian