

Titans Mega Sports Camp

<u>Dates</u>: May 29-31, 2018 <u>Time</u>: 9 AM – 4 PM daily

<u>Camper Ages</u>: Students current ages 5-13 <u>OR</u> future grades K-8

Preregistration** - May 16, 2018

(Form **AND** fee must be received by this date to receive a t-shirt.)

<u>Late Registration/Dropoff</u>: 8:30 AM – 9:00 AM daily in the gym lobby at Ridgeland HS

<u>Camp Fee</u>: \$50 (\$40 MCS employees)* (includes camp, lunch, and a t-shirt**)

*MCS ID required at registration.

Concessions: available for purchase during break times (not included in camp fee)

Please fill out the form below, enclose your fee, and drop off at RHS office $\underline{\mathbf{OR}}$ mail to Ridgeland Athletics Department

Attn: Sports Camp 586 Sunnybrook Rd Ridgeland, MS 39157

Name of Camper: ______Grade Fall 2018: _____

Parent Contact #:		Secondary Contact #:				
Parent Email:				MCS Em	nployee* Y N	
Medical Condition	ıs:		Physician			
T-shirt Size	(Circle One):	YS YM	YL YXL AS	AM AL AX	L A2XL	
		Daily (Camp Schedule			
A.M. Session 1	Session 1	9:00-10:15	P.M. Session 2	Session 2	1:00-2:15	
Basketball, Volleyball, Soccer, Dance	Break	10:15-10:30	Baseball, Softbal	, Break	2:15-2:30	
	Resume	10:30-11:45	Football, Cheer	Resume	2:30-3:50	
	Lunch	12:00-12:45	5	Pick Up	4:00	
required, by privat while enrolled in, a will be obligated for actual knowledge a	e physician ar and engaged in or all loss resu and appreciation camp, and he	onsent for mad/or hospitanthe activitions in the activition of the pacted on the pacted	ry child	ness or injury he o orts Camp. I furthe s parent or legal gu p, including the ris	r she may incur or agree that I nardian, have sks involved in	
Parent/Guardian S	Signature			Date		
Ear mara inform	ation place	contact Pid	galand Athlatics of	fice at 601 909 97	20 or omail at	

For more information, please contact Ridgeland Athletics office at 601-898-8739 or email at rhsathetics@madison-schools.com.