



Falcon Sports Camp will be organized with an emphasis on developing fundamentals, self-esteem, team-building, and sportsmanship. Campers will be acknowledged in an awards ceremony at the completion of each camp.

MONMOUTH REGIONAL SPORTS CAMP

CAMP HIGHLIGHTS

Individual & Group Instruction

Free T-Shirt

Current MRHS Coaches, Trainers, & Alumni

\$150/camp

Soccer(Boys & Girls)— June 25-28 3pm-6pm (front fields)

Field Hockey(Girls)— June 25-28 3pm-6pm (front fields)

Girls' Lacrosse—June 25-28 9am-12pm (front fields)

Wrestling(Boys & Girls)—July 16-19th 3pm-6pm (gymnasium)

All camps at: 1 Norman J Field Way, Tinton Falls NJ 07724

Basketball Camp

Both boys & girls camps will feature former Division 1 Coaches and Players

JULY 16-19th

9am-12pm

\$150

Contact Angela.teeple@monmouthregional.net with any questions or to register electronically

Please provide the following information and include a check payable to **Falcon Sports Camp** or **Darren Spadavecchia**.

Mail to:

12 Griffin St

Monmouth Beach, NJ 07750

Camp(s) Attending _____ Total Cost Included _____

Name of Student _____ Shirt size (adult) S M L XL (please circle one)

Age _____ Gender _____ Email _____

Address _____ City _____ Zip code _____

Emergency Contact Name _____ Emergency contact phone # _____

Refunds/Cancellations—only honored if documented evidence of illness/injury is presented (minus \$30.00 processing fee)

PARENT /GUARDIAN WAIVER

I realize injuries can be a consequence of participation in this activity and no amount of reasonable supervision or use of the facility will prevent injury. I have carefully considered how the possible consequence of injury may impact my child's life, and I chose to accept this risk and allow him/her to participate in the designated activity. In accepting this risk, I expressly and explicitly release, discharge and waive any and all responsibility of Falcon Sports Camp, Monmouth Regional, and the employees of any and all of the fore-going, pursuant to, or pertaining or related to, or arising from, in any manner, injuries to my child as a result of his/her participation in this activity. By my signature, I certify that I completely understand this document.

Signature of Parent or Guardian _____ Date _____