

ECA EAGLES Sports Camps

ECA Basketball Shooting Clinic – Monday, June 1, 6:00 - 8:00pm
ECA Basketball Ball Handling & Scoring Moves Clinic – Monday, June 8, 6:00 - 8:00pm
ECA Soccer Camp with Steve Long – Monday - Friday, June 15 - 19, 2:00 - 4:30pm.
Jackie Stiles Basketball Camp* – Monday, July 6 - *see JSBC flyer for details & registration
ECA Volleyball Skills Camp – Monday - Friday, August 10 - 13, 9:00am - 12:00 noon

Where: ECA Secondary Campus Gym (4052 Nonchalant Circle South)

Costs: Cash or check payable to ECA:
ECA Basketball Skills Clinics - \$20 for 1, or \$35 for both
Jackie Stiles Basketball Camp - \$50
ECA Soccer Camp with Steve Long – \$50
ECA Volleyball Skills Camp - \$75

Registration Deadlines: June 1 & June 8 ECA Basketball Clinics – until filled
Jackie Stiles Basketball Camp – through May 29, open to ECA only; after May 29, until filled
ECA Soccer Camp with Steve Long – until filled
ECA Volleyball Skills Camp – through July 31 to receive a camp t-shirt; after July 31, until filled

What to bring: Athletic clothes, indoor athletic shoes (plus cleats for the soccer camp), and a water bottle.

More information: Contact Don Steiner at 597-3675 or dsteiner@ecaeagles.org.



ECA Eagles Sports Camps - Registration

Please complete and return **one Registration for each child, for each camp/clinic**, to ECA by the above dates.

Camper's Name: _____ **Age:** _____ **09-10 Grade:** _____
(please clearly print full legal name)

Registering for: June 1 **Basketball Shooting Clinic** June 8 **Basketball Ball Handling & Scoring Moves Clinic**

June 15-19 **Soccer Camp with Steve Long** August 10-13 **Volleyball Skills Camp**

T-shirt size (Volleyball Skills Camp only): Youth SM Youth MED Youth LG Youth XL Adult SM Adult MED Adult LG Adult XL

Address: _____

City: _____ **State:** _____ **Zip:** _____

Medications/Allergies: _____

Parent's Name: _____ **Contact Number(s):** _____

Emergency Contact: _____ **Contact Number(s):** _____

Release – Waiver of Liability and Verification of Insurance: I the undersigned, on behalf of myself and my child listed above, understand the risks associated with sport camp/clinic participation and do hereby hold harmless; covenant not to sue; and release and waive any member of the camp/clinic coaching staff, the host institution, and Evangelical Christian Academy, as well as its employees and board members, from any and all claims of liability. I further assert that my child is physically able to participate in the camp/clinic; and, in the event of injury or illness during the camp/clinic, I consent to emergency medical treatment, hospitalization, or other medical treatment as may be necessary for the welfare of my child. In addition, I verify my child has accident insurance coverage, and I will accept all financial responsibilities of injuries arising from participation in this camp/clinic.

Parent/Guardian Signature

Date