## Summer 2014 Camps/Clinics Enrolled Mulvane Students Only

## Sponsored by Varsity Head Coaches and their Assistants

All payments for camps/clinics should be made payable to the coach listed below. (Make checks payable to individual coach listed - use separate form and check for each camp).

|   |  |  |   |  | -   |  |  |              |         |
|---|--|--|---|--|---|--|--|--------------|---------|
| Girls'  | Kendra Banzet  | kbanzet@usd2   | 63.org  | 1  | Boys'   | Don Shirley  |  | y@usd2       | 60.com  |
| Ваѕкетран   |  | 323 E. 119th St., Mulvane, KS 67110<br>ome 316-200-1981 or MHS 777-1183 x4503  |   |  | Basketball  | 501 Erin, Mulvane, KS 67110<br>Home 316-777-0271   | )  |              |         |
|   | May 27-29, 2014 Tue  |  | FYI HS Girls Open BKB   | FYI HS Boys  |   | June 16 - 18, 2014 Monday  | - Wednesday  |              |         |
|   | Mulvane High School  | ol (Deadline - M   | Gym Times   | Open BKB<br>Gym Times  |   | Mulvane High School  | Wednesday  |              |         |
|   | Mulvane High School<br>9-10-11-12 Grades<br>7:00 - 9:00 PM                         | 4-8 Grades   | 7:30 - 9:00 PM<br>June 4 - July 16  | Mondays  |   | 9-10-11-12 Grades  | (Deadline - Ju   | une 11)      |         |
|   | 7:00 - 9:00 PM   | 9:00 AM - 11:00 AM   | Monday &  | 6:00 - 7:30 PM   |   | 2:00 - 4:00 PM   | `  | ,            |         |
|   | \$40.00 per athlete inc  | ludes t-shirt (\$50 after May 21)  | Wednesday   | June 16 - July 14  |   | \$40.00 per athlete includes t-s   | shirt (\$50 after .  | June 11)     | )       |
|   |  |  |   |  |   |  |  |              |         |
| Girls'  | Anna Johnson   | ajohnson@usd2  | 63.org  |  |   | Danielle Phillips  | dphillir   | ps@usd2      | 263.org |
| Soccer  | 1104 Grand Street, W   |  |   |  | Volleyball  | 1772 N. Myers Cir.   |  |              |         |
|   | Cell 620-222-1335 or   | MHS 777-1183   |   | FYI VB   | '   | Home 316-250-4107  |  |              |         |
|   | June 17 - 19, 2013 To  | uesday - Thursday  |   | Open Gym Times   |   | June 2 - 4, 2014 Monday - W  | Vednesday  |              |         |
|   | Lyle Couch Stadium   |  |   | 3:30 - 5:30 PM<br>June 5 - July 17                                     |   |  | (Deadline - Ma   | ay 13)       |         |
|   | 9-10-11-12 Grades  |  |   | (no July 1 or 3)   |   | 9-10-11-12 Grades  | 4-8 Grades   |              |         |
|   | 9:00 - 11:00 AM<br>\$30.00 per athlete inc   | ludes a t-shirt (Deadline - J  | uno (1)   | Tuesday &<br>Thursday  |   | 5:00 - 7:00 PM<br>\$30.00 per athlete includes t-s   | 3:00 - 4:45 PI   |              |         |
|   | φου.ου per atrilete inc  | iddes a t-stillt (Deadlille - 5  | une 9)  | Thursday   |   | φου.ου per auniète includes t-s  | silit (\$30 aiter i  | iviay 13)    |         |
|   |  |  | <del></del>   |  | h   |  |  |              |         |
| FYI - Summ  |  | s June 16 - July 31, 201   |   |  | Football  | Dave Fennewald   | dfennewa   | ald@usd2     | 263.org |
| Contact Person: Dave Fennewald (info to the rig<br>Mondays, Tuesdays & Thursdays all at MHS<br>7:00-8:30 AM HS Students   |  |  | 1)  |  |   |  | Prairie Run Ct., Mulvane, KS 67110<br>e 777-9231 or MHS 777-1183 |              |         |
|   |  |  |   |  |   | June 2 - 6, 2014 Monday - Friday   |  |              |         |
|   | 8:30-9:15 AM I   |  |   |  |   | Lyle Couch Stadium   | ilday  |              |         |
|   |  |  | <u>.</u>  |  |   | 9-10-11-12 Grades  | (Deadline - Ma   | av 21)       |         |
|   |  |  |   |  |   | 8:00 - 9:30 AM & 6:30 - 8:30   |  | ,,           |         |
|   |  |  |   | _  |   | \$30.00 per athlete includes a   |  |              |         |
| All co  | mn/olinio nartioir   | oants must have appro  | nriata athlatia   |  |   | July 7 - 11, 2014 Monday - F   | riday  |              |         |
|   |  |  |   |  |   | Lyle Couch Stadium   |  |              |         |
| snoes.  | Basketbali and v   | olleyball participants r   | nust nave ciean   |  |   | 7-8 Grades   | (Deadline - Ju   | uly 1)       |         |
|   |  | soled shoes.   |   |  |   | 9:15 - 11:00 AM<br>\$30.00 per athlete includes a t  | t-chirt  |              |         |
|   |  |  |   | ı  |   | posico por annoto monaco a   |  |              |         |
|   |  |  |   |  | FYI - Hutchin   | son CC High School Football (  | Camp Jun   | ne 11 - 13   | 3, 2014 |
|   |  |  |   |  |   |  |  |              |         |
|   |  |  |   |  |   |  |  |              |         |
|   |  | Wildcat Summe  | r Camps/Clinic  | s 2014   |   |  | T-Shirts   | (Youth)      | Size    |
|   |  |  |   |  |   |  | Sm N   | /led         | Lg      |
| Name  |  | Grade 2014-2015  |   |  | CIRCLE  |  |  | <u> </u>     |         |
|   |  |  | Grade 2014-2015   |  |   | ONE  | T-Shirts   | (Adult)      | Size    |
| Age   | <u> </u>   |  |   |  |   |  |  |              |         |
| Age   | •  | Height W   |   |  |   |  | Sm M   | /led         | Lg      |
|   |  | Height W   | eight   | M/F  |   | _  | Sm N<br>X Lg X   | /led<br>X Lg | Lg      |
|   |  |  | eight   | M/F  |   | Camp Attending   | Sm M<br>X Lg XX  | /led<br>X Lg | Lg      |
|   | Guardians Names _  | Height W   | eight<br>Email Address  | _ M/F  |   | Camp Attending Session Attending   | Sm M<br>X Lg XX  | /led<br>X Lg | Lg      |
| Parents/G<br>Address  | Guardians Names _  | Height W   | eight<br>Email Address  | _ M/F  |   | Camp Attending Session Attending   | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address  | Guardians Names _  | Height W   | eight<br>Email Address<br>Zip   | M/F  |   | Camp Attending Session Attending Amount Enclosed   | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu   | Guardians Names  | Height W   | eight<br>Email Address<br>Zip   | M/F  |   | Camp Attending Session Attending Amount Enclosed   | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence  | Guardians Names  | Height W   | eight<br>Email Address<br>Zip   | M/F  |   | Camp Attending Session Attending Amount Enclosed   | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence  | Guardians Names City, State umber cy Contact cy Contact                            | Height W   | eight<br>Email Address<br>Zip (Work)  | _ M/F  |   | Camp Attending Session Attending Amount Enclosed (cell)  | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence<br>Emergence   | Guardians Names City, State umber cy Contact cy Contact                            | Height W   | eight<br>Email Address<br>Zip (Work)  | M/F  |   | Camp Attending Session Attending Amount Enclosed   | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence<br>Emergence   | Guardians Names City, State umber cy Contact cy Contact umber                      | Height W  (Home)   | Email Address Zip (Work)  | M/F  |   | Camp Attending Session Attending Amount Enclosed (cell)  | Sm N<br>X Lg XX  | fled<br>X Lg | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence<br>Emergence   | Guardians Names City, State umber cy Contact cy Contact umber (Make                | Height W  (Home)  (Home)   | Email Address Zip (Work) (Work)   | bove - use se  | parate form   | Camp Attending Session Attending Amount Enclosed (cell)  | Sm N<br>X Lg X)  | Med<br>X Lg  | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence<br>Emergence   | Guardians Names City, State umber cy Contact cy Contact umber (Make                | (Home)  (Home)  checks payable to individ  | Email Address Zip (Work) (Work)   | bove - use se  | parate form   | Camp Attending Session Attending Amount Enclosed (cell) (cell) and check for each camp   | Sm N<br>X Lg X)  | Med<br>X Lg  | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergence<br>Emergence   | Guardians Names City, State umber cy Contact cy Contact umber (Make                | (Home)  (Home)  checks payable to individ  | Email Address Zip (Work) (Work)   | bove - use se  | parate form   | Camp Attending Session Attending Amount Enclosed (cell) (cell) and check for each camp   | Sm N<br>X Lg X)  | Med<br>X Lg  | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergenc<br>Emergenc<br>Phone Nu   | Guardians Names City, State umber cy Contact cy Contact umber  (Make Please send a | (Home)  (Home)  (e checks payable to individual completed forms (with a Mulvane H  | Email Address Zip (Work) (Work) (Work) dual coach listed a checks) to either th   | bove - use se le address list. Rock Road                               | eparate form<br>ted for the i   | Camp Attending Session Attending Amount Enclosed (cell) (cell) and check for each camp   | Sm N<br>X Lg XX  | Med<br>X Lg  | Lg      |
| Parents/G<br>Address<br>C<br>Phone Nu<br>Emergenc<br>Emergenc<br>Phone Nu<br>Medical R<br>submitted                       | Guardians Names City, State umber cy Contact cy Contact umber  (Make Please send a | (Home) (Home) (Home) (Home) (With a multiple completed forms must have their own management of the multiple completed forms (with a multiple completed forms must have their own management of the multiple completed forms (with a multiple completed forms multiple completed forms multiple completed forms (with a multiple completed forms multiple completed forms multiple completed forms (with a multiple completed forms forms for multiple completed forms forms for multiple completed forms (with a multiple completed forms for multiple completed forms for multiple completed forms for multiple completed forms (with a multiple completed forms for multiple completed fo                            | Email Address Zip (Work) (Work) (Work) dual coach listed a checks) to either th   | bove - use se le address list. Rock Road                               | eparate form<br>ted for the i   | Camp Attending Session Attending Amount Enclosed (cell) (cell) (cell) and check for each camp individual coach or to their   | Sm N<br>X Lg XX  | Med<br>X Lg  | Lg      |
| Parents/G Address C Phone Nu Emergence Emergence Phone Nu  Medical R submitted Insurance PARENT/C The undersi hereby auth | Guardians Names  | (Home)  (Home) | Email Address Zip (Work)  (Work)  (Work)  dual coach listed a checks) to either th ligh School, 1900 th edical coverage. Of the camper. | bove - use serve address list. Rock Road campers will representations. | eparate formated for the integrate of the allowed in the risks inhergency requiring | Camp Attending Session Attending Amount Enclosed (cell)  (cell)  and check for each camp individual coach or to their (S 67110  red to play unless the followed to play unless the follower of the participation in the Wildcang medical attention in case neith | Sm N X Lg XX X Lg XX X X Lg XX X X X X X X X                     | t tation is  | Lg      |
| Parents/G Address C Phone Nu Emergence Emergence Phone Nu  Medical R submitted Insurance PARENT/C The undersi hereby auth | Guardians Names  | (Home)  (Home) | Email Address Zip (Work)  (Work)  (Work)  dual coach listed a checks) to either th ligh School, 1900 th edical coverage. Of the camper. | bove - use serve address list. Rock Road campers will representations. | eparate formated for the integrate of the allowed in the risks inhergency requiring | Camp Attending Session Attending Amount Enclosed (cell) (cell) (cell) and check for each camp individual coach or to their (S 67110  red to play unless the follower of the policy Number erent in participation in the Wildca                                   | Sm N X Lg XX X Lg XX X X Lg XX X X X X X X X                     | t tation is  | Lg      |