

**MASON PUBLIC SCHOOLS  
BOYS' YOUTH BASKETBALL CAMP**

**2018**

Dates: June 4 - 7                      Grades: 9<sup>th</sup> - 12<sup>th</sup>                      3:00 p.m. - 5:00 p.m. Mason High School  
          Mon - Thurs.  
June 18 - 21                      Grades: 3<sup>rd</sup> - 5<sup>th</sup>                      2:30 p.m. - 4:00 p.m. Mason High School  
          Mon - Thurs.                      6<sup>th</sup> - 8<sup>th</sup>                      12:30 p.m. - 2:30 p.m. Mason High School

Cost: \$50 Includes t-shirt if received by June 9. **Walk-ins Welcome**

Location: Mason High School Fieldhouse

Staff: Mason High School coaching staff and current/former basketball players

Equipment: Workout clothes and appropriate athletic shoes

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Please make checks payable to: **Mason Public Schools**

Please send application and payment to:

Lee Chaney  
Mason High School  
1001 S. Barnes Street  
Mason, MI 48854  
(517) 525-9285 or (517) 676-6535

Inquiries may be made by calling:

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**Boys' Basketball**

Athletes Name \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Insurance Co. \_\_\_\_\_

**t shirt size** (child sizes)            S    M    L    XL            circle one

**t shirt size** (adult sizes)        S    M    L    XL            circle one

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.

Circle grade enrolled in for the 2018/19 school year.

9 <sup>th</sup> - 12 <sup>th</sup>	June 4 - 7	3:00 p.m. - 5:00 p.m.
6 <sup>th</sup> - 8 <sup>th</sup>	June 18 - 21	12:30 p.m. - 2:30 p.m.
3 <sup>rd</sup> - 5 <sup>th</sup>	June 18 - 21	2:30 p.m. - 4:00 p.m.

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Parent/Guardian's Signature

**Chaney**

**MASON PUBLIC SCHOOLS  
GIRLS' YOUTH BASKETBALL CAMP  
2018**

Date:	June 11 - 14	Grades:	9 <sup>th</sup> – 12 <sup>th</sup>	5:00 p.m. – 7:00 p.m. (Monday @ MMS)
	M - Th			(Tues – Thur. @ MHS)
	June 18 – 21		6 <sup>th</sup> – 8 <sup>th</sup>	8:00 a.m. – 10:00 a.m. (MHS fieldhouse)
	June 18 – 21		1 <sup>st</sup> – 5 <sup>th</sup>	10:00 a.m. – 11:00 a.m. (MHS fieldhouse)

Cost: \$50 before June 11, 2018. Includes t-shirt. **Walk-ins Welcome**

Location: Mason High School Fieldhouse (June 11<sup>th</sup> held at Mason Middle School)

Staff: Jennifer Walkington, Girls' Varsity Basketball Coach  
Mason High School girls' basketball coaches, girls' varsity basketball players, and former players

Equipment: Workout clothes and appropriate athletic shoes  
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Please make checks payable to: **Mason Public Schools**

Please send application and payment to:

Jennifer Walkington  
Mason High School  
1001 S. Barnes Street  
Mason, MI 48854  
(517) 819-7478 or (517) 676-6535

Inquiries may be made by calling:

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**Girls' Basketball**

Athletes Name \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Insurance Co. \_\_\_\_\_

**t shirt size** (child sizes) S M L XL circle one  
**t shirt size** (adult sizes) S M L XL circle one

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.  
Circle grade enrolled in for the 2018/19 school year.

Date:	June 11 - 14	Grades:	9 <sup>th</sup> – 12 <sup>th</sup>	5:00 p.m. – 7:00 p.m. (Monday @ MMS)
	M - Th			(Tues – Thur. @ MHS)
	June 18 – 21		6 <sup>th</sup> – 8 <sup>th</sup>	8:00 a.m. – 10:00 a.m. (MHS fieldhouse)
	June 18 – 21		1 <sup>st</sup> – 5 <sup>th</sup>	10:00 a.m. – 11:00 a.m. (MHS fieldhouse)

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

\_\_\_\_\_ Parent/Guardian's Signature

**Walkington**

**MASON PUBLIC SCHOOLS  
YOUTH VOLLEYBALL CAMP  
2018**

Date: June 11 - 15      Grades: Girls' only 9th - 12th      8:00 a.m. - 10:30 a.m. Mason High School  
 Mon - Fri                      Girls' only 6th - 8th      10:30 a.m. - 12:30 p.m. Mason High School  
    Girls'/Boys' 5th - under      1:00 p.m. - 2:30 p.m. Mason High School

Cost: \$50 before June 6, 2018. Includes t-shirt. **Walk-ins Welcome**

Location: Mason High School Fieldhouse

Staff: Mason High School volleyball coaches and players

Equipment: Workout clothes and appropriate athletic shoes  
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Please make checks payable to: **Mason Public Schools**

Please send application and payment to:

Mason Volleyball  
 1266 Sumac Lane  
 Holt, MI 48842  
 (517) 699-8431 or (517) 676-6535

Inquiries may be made by calling:

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**Volleyball**  
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Athletes Name \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Insurance Co. \_\_\_\_\_

**t shirt size** (child sizes)      S      M      L      XL      circle one  
**t shirt size** (adult sizes)      S      M      L      XL      circle one

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.  
 Circle grade enrolled in for the 2018/19 school year.

Mon - Fri                      Girls' only 9th - 12th      8:00 a.m. - 10:30 a.m. Mason High School  
    Girls' only 6th - 8th      10:30 a.m. - 12:30 p.m. Mason High School  
    Girls'/Boys' 5th - under      1:00 p.m. - 2:30 p.m. Mason High School

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

\_\_\_\_\_ Parent/Guardian's Signature

**MASON PUBLIC SCHOOLS  
BOYS' & GIRLS' TENNIS CAMP  
2018**

Date: June 26-29  
Tues - Fri

Grades 9<sup>th</sup> - 12<sup>th</sup>  
3<sup>rd</sup> - 8<sup>th</sup>

9:00 a.m. - 11:00 a.m.  
11:00 a.m. - 1:00 p.m.

Cost: \$50 before June 20, 2018. Includes t shirt. **Walk Ins Welcome.**

Location: Mason High School tennis courts

Staff: Mason High School tennis coaches, former and current players

Equipment: Workout clothes, appropriate athletic shoes, and tennis racket  
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Please make checks payable to: **Mason Public Schools**

Please send application and payment to:

Jim D'Angelo  
611 Gale Road  
Eaton Rapids, MI 48827  
(517) 819-7200 or (517) 676-6535

Inquiries may be made by calling

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**Youth Tennis**  
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Athletes Name \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Insurance Co. \_\_\_\_\_

**t shirt size** (child sizes) S M L XL circle one  
**t shirt size** (adult sizes) S M L XL circle one

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.

Circle grade enrolled in for the 2018/19 school year. 9<sup>th</sup> - 12<sup>th</sup> 9:00 a.m. - 11:00 a.m.  
3<sup>rd</sup> - 8<sup>th</sup> 11:00 a.m. - 1:00 p.m.

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**Parent/Guardian's Signature**

**D'Angelo**

**MASON PUBLIC SCHOOLS  
GIRLS' YOUTH GYMNASTICS CAMP  
2018**

Date: June 11-14 Age 3 – 13 years olds 9:00 a.m. - 11:30 a.m.  
Mon - Thurs

Cost: \$50 before June 4, 2018. Includes t shirt. Space is limited. Walk-ins will be accepted only if participant capacity has not been met

Location: Mason High School – All Purpose Room

Staff: Abby Nash, Gymnastics Coach and current/former gymnasts

Equipment: Leotard (shorts & grips are optional)

Please make checks payable to: **Mason Public Schools**

Please send application and payment to:

Abby Nash  
Mason High School  
1001 S. Barnes Street  
Mason, MI 48854  
(517) 676-6510 or (517) 676-6535

Inquiries may be made by calling:

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**Girls' Gymnastics**

Athletes Name \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

Parent Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

Insurance Co. \_\_\_\_\_

**t shirt size** (child sizes) S M L XL circle one

**t shirt size** (adult sizes) S M L XL circle one

List the age your will be child at the end of 2018 school year. \_\_\_\_\_

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.

June 11-14 Age 3 – 13 years olds 9:00 a.m. - 11:30 a.m.  
Mon - Thurs

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions. Also include an email, so the coaches can contact you for additional information.

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

\_\_\_\_\_ Parent/Guardian's Signature

**Nash**

**MASON PUBLIC SCHOOLS  
BOYS' YOUTH FOOTBALL CAMP  
2018**

Date: June 11 - 14                      Grades: 4<sup>th</sup> - 8<sup>th</sup> 11:00 a.m.- 12:30 p.m.  
Mon - Thur

Cost: \$50 before June 6, 2018. Includes t-shirt. **Walk-ins Welcome.**

Location: **Mason High School Football Field**

Staff: Gary Houghton, Varsity Football coach  
Mason High School and Middle School Football Coaches  
Present and Past Mason High School Players

Equipment: Shirt, shorts and football cleats (and tennis shoes, in case camp is brought indoors)  
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Please make checks payable to: **Mason Public Schools**

Please send application full payment to:

Gary Houghton  
Mason High School Athletics  
1001 S. Barnes Street  
Mason, MI 48854  
(517) 676-6535

Inquiries may be made by calling:

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**Boys' Football**

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Insurance Co. \_\_\_\_\_ Age \_\_\_\_\_ Grade in the Fall \_\_\_\_\_

**t shirt size** (child sizes)      S    M    L    XL      circle one  
**t shirt size** (adult sizes)    S    M    L    XL      circle one

I wish to enroll in the following session of Mason Public Schools Summer Camp Program.

Circle grade enrolled in for the 2018/19 school year.

June 11 - 14                                      Grades: 4<sup>th</sup> - 8<sup>th</sup>                                      11:00 a.m.- 12:30 p.m.  
Mon - Thurs

I hereby waive and release the Mason Public Schools, its camp director and any other persons connected with the camp, from any and all liabilities for injuries or illness incurred while my son/daughter is in attendance at one of the above mentioned summer camp sessions.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Parent/Guardian's Signature