

# Clairemont Camp Details:

**Date:** Saturday March 25<sup>th</sup>-  
Tuesday 28<sup>th</sup>

**Time:** 9:00 am- 1:30 pm

**Ages:** Grade K-8

**Location:** Clairemont High School  
Football Stadium, Gym, and Indoor  
field. \*Everyday meet in the  
stadium after checking in with staff.

**What to bring:** Comfortable  
athletic clothes, both shoes &  
cleats.

\*Water& Gatorade will be provided

\*Campers can bring a lunch as an  
alternative to the spaghetti lunch  
that will be provided.

**Cost:** Free (Foundation can also  
take any donations)



# Camp Schedule:

9:00 Introduction and Stretch

9:30 Session #1

11:00 Lunch Time

11:45 Session #2

1:15 Closing remarks

## Sports Offered:

**Football, Basketball, Soccer, and  
Cheer**

*We encourage the **Clairemont Cluster Students**  
to come together and meet their fellow  
neighborhood classmates.*



# Camper Info:

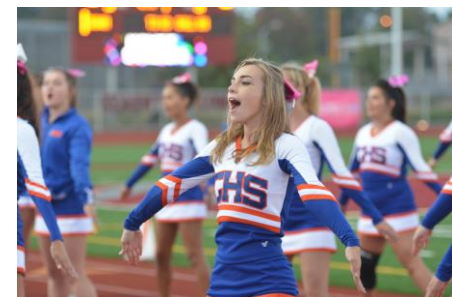
Name: \_\_\_\_\_

Grade: \_\_\_\_\_

Address: \_\_\_\_\_

Parent Phone #: \_\_\_\_\_

Shirt Size: Youth S M L XL



## Liability Waiver

To the best of my knowledge, my son/daughter is in good physical condition and fully able to participate in this camp. I am fully aware of the risks and hazards connected with the participation in this event, including physical injury or even death, and hereby elect to allow my son/daughter in said event, knowing that the associated physical activity may be hazardous to my child and his/her property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OR LOSS, PROPERTY DAMAGE, OR PERSONAL INJURY, INCLUDING DEATH, that may be sustained by my son/daughter, or loss or damage to property owned by me, or my child, as a result of participation in this camp. I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, the San Diego Unified School District, Clairemont High School, Clairemont Foundation- Camp or their officers, servants, agents, and employees from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by my child, or to any property belonging to my child, while participating in physical activity, or while on or upon the premises where the event is being conducted.

Campers

Name: \_\_\_\_\_

Parent (Guardian)

Name: \_\_\_\_\_

Parent (Guardian)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## Clairemont Foundation

4150 Ute Dr.  
San Diego , CA 92117

[chschieftains.com](http://chschieftains.com)

Contact:

Manny Diaz Athletic Director  
[mdiaz5@sandi.net](mailto:mdiaz5@sandi.net)

Or

Foundation Member

Campers must have this form filled out or they will not be able to participate.

The Clairemont foundation will accept donations of \$20

Clairemont Foundation  
proudly presents:  
2nd annual Sports  
Camp for Clairemont  
Cluster Students:  
Football, Basketball, Soccer, and  
Cheer

**FREE!!**

**Saturday-Tuesday**

**March 25<sup>th</sup>- 28th,  
2017**

**9:00am-1:30 PM**



