



Annual Crews Lake Middle School Summer Camps

Volleyball Camp: June 20-21 2022

Boys/Girls Basketball: June 22-23 2022

CLMS Summer Camps are for upcoming 4th-8th grade students

We will be conducting Summer Camps at Crews Lake Middle School for the summer in June, 2022. Camps will be conducted for Volleyball and Basketball. Each camp will be \$20 per attendee, per sport. Example, if attending both final cost is \$40.

We will begin in the Crews Lake Gymnasium so please drop off your child in the front of the school and the doors to the gymnasium will be open. Please plan to pick up at 7:00pm in front of the gym.

Please complete the form on the next page with payment of cash or check and drop off or mail to Crews Lake Middle School by June 13, 2022. Any questions please contact the Athletic Director lleider@pasco.k12.fl.us

Attendees will:

- Learn about practice and game preparation
- Be instructed on the emphasis on fundamentals, position training, drills, and scrimmages
- Focus on conditioning and coordination
- Be instructed by our Middle School and local High School coaches.

Attendees must bring:

Basketball – Meet in Gym at 5pm

- Wear comfortable clothing such as shorts and a shirt
- Running shoes
- Water bottle or jug

Volleyball – Meet in Gym at 5pm

- Wear comfortable clothing such as shorts and a shirt
- Running shoes
- Water bottle or jug

Crews Lake Middle School Athletic Camps

Please Check for the camp in which you will be attending (Check all that apply)

_____ \$20 - Volleyball Camp: June 20-21 5:00pm – 7:00pm
_____ \$20 - Boys/Girls Basketball: June 22-23 5:00pm – 7:00pm

Name: _____

Grade (2022-2023): _____ Age: _____

Address: _____

City: _____ Zip Code: _____

Home Phone: _____ Emergency Phone: _____

Any medical information that we would need to know:

Please read carefully and sign below:

In an event of a medical emergency, I grant the Camps Staff permission to have my child medically treated and transported to the nearest hospital if deemed medically necessary by the attending paramedics. I also understand that I am solely responsible for any medical expenses incurred as a result of an injury to my child. In addition, I release from liability and hold CLMS or the Pasco County School system harmless from any and all claims for loss of property, personal injury, or death sustained by my son/daughter arising out of any activities conducted at Crews Lake Middle School.

Name: _____

Relationship to child: _____

Signature: _____

Date: _____

Complete form and send payment for Crews Lake Middle School Athletics to:
Crews Lake Middle School
15144 Shady Hills Road,
Spring Hill, FL 34610
Attention: Lisa Leider

Any questions or comments please contact Athletic Director Lisa Leider

Email: lleider@pasco.k12.fl.us

School Phone: 727-246-1600