

REVISED APRIL 5, 2016

# SHARKS SUMMER CAMPS



**WHERE:** Ponte Vedra High School

**WHEN:** Camps starting May 30th

\_\_\_ **Baseball/Youth Camp**                    **\$135**  
Ages 6 to 13  
June 19th-22<sup>nd</sup> (23<sup>rd</sup> as rain date)  
9am to Noon  
Meet at Field

\_\_\_ **Baseball/ Strength Camp**                    **\$115**  
Rising Juniors and Seniors  
June 1<sup>st</sup> through July 15<sup>th</sup>  
Meet in Weight Room

\_\_\_ **Baseball/Skills Camp**                    **\$295**  
Rising 9<sup>th</sup> Graders to Seniors  
June 1<sup>st</sup> through July 15<sup>th</sup>  
Meet at Field

\_\_\_ **Bud Beech Summer Camp**                    **\*\*\***  
Boys & Girls Ages 6-13  
Starting June 5th M-Th  
8:30 am to 3 pm  
Weekly rates as low as \$120  
Daily rates as low as \$30  
\*\*\*Complete details on back or  
[www.budbeech.com](http://www.budbeech.com)

\_\_\_ **Softball Camp for Girls**                    **\$125**  
Girls: 1<sup>st</sup> through 8<sup>th</sup> grades  
June 5<sup>th</sup> - 8<sup>th</sup> 9 am to Noon  
Experience Level? \_\_\_\_\_  
Meet at Field  
\*\*\*Complete details at:  
[pvhs.stjohns.k12.fl.us/athletics/](http://pvhs.stjohns.k12.fl.us/athletics/)

\_\_\_ **Volleyball Camp**                    **\$130**  
Rising 4<sup>th</sup> - 9<sup>th</sup>  
June 5<sup>th</sup> -8<sup>th</sup> 9-11:30 am  
Meet in Gym

**CAMPER'S NAME:** \_\_\_\_\_

**SCHOOL:** \_\_\_\_\_

**GRADE IN THE FALL:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**PARENT/GUARDIAN:** \_\_\_\_\_

**CELL:** \_\_\_\_\_ **WORK/HOME:** \_\_\_\_\_

**PARENT/GUARDIAN:** \_\_\_\_\_

**CELL:** \_\_\_\_\_ **WORK/HOME:** \_\_\_\_\_

**PREFERRED EMAIL:** \_\_\_\_\_

**WHO WILL BE PICKING- UP CAMPER:**  
\_\_\_\_\_

**SEND COMPLETED REGISTRATION WITH PAYMENT TO:**

**SHARKS SUMMER CAMPS,**

**217 SOUTH MILL RIDGE TRAIL**

**PONTE VEDRA BEACH, FL 32082**

## RELEASE AND INDEMNITY WAIVER:

**Waiver Claims:** I, as a parent or guardian, hereby give permission for my child to participate in the Sharks Summer Camp program at Ponte Vedra High School. I acknowledge the fact that he/she is physically able to participate in the camp activities. I hereby authorize the directors of the Sharks Summer Camp program to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost due to sickness or injury to my son/daughter. I hereby waive any claim I might have against Sharks Summer Camps and the institution providing the facilities. The Bud Beech Summer Camp and Sharks Summer Camps are operated by Bud Beech Basketball Camps, Inc.

X \_\_\_\_\_

Parent/Guardian Signature

Date: \_\_\_\_\_, 2017

**INSURANCE:** ALL SHARKS SUMMER CAMPS PARTICIPANTS ARE COVERED BY A SECONDARY INSURANCE POLICY WITH LIMITED BENEFITS. THE PRIMARY HEALTH AND ACCIDENT INSURANCE FOR THIS CAMP IS THAT HELD BY THE CAMPER/REGISTRANT AND HIS OR HER FAMILY. BUD BEECH BASKETBALL CAMP, INC. DBA SHARKS SUMMER CAMPS. TAX ID# #55-0842257.

**CHECK #** \_\_\_\_\_ **AMOUNT \$** \_\_\_\_\_