

Third Annual FREE

ALL KIDS SPORTS PERFORMANCE COMBINE AND EDUCATION CAMP

Improve Athletic Skills and Learn Healthy Lifestyles for Your Future



WHO: ALL 1st-8th grade children

WHAT: ***FREE camp!*** Includes:

- FREE LUNCH/SNACK
- FREE CAMP T-SHIRT
- Special Guest Appearance!

WHERE*: Hiawatha High School
600 Red Hawk Dr.
Hiawatha, KS

**In case of inclement weather, the camp will be held inside of the gymnasium.*

WHEN: Saturday, June 11, 2022
8:00 am – 12:30 pm

BRING A T-SHIRT, SHORTS, AND CLEATS OR TURF SHOES!

Contacts: Gary Johnson: (913) 220-3131 or tcuchase@sbcglobal.net
Iowa Tribe of Kansas and Nebraska: (785) 595-3258
Hiawatha High School: (785) 742-3312

PARTICIPANTS & VOLUNTEERS: Registration is required. Please fill out the attached form.

Made possible by the American Indian Great Plains Working Group, the Iowa Tribe of Kansas and Nebraska, White Cloud Health Center, the Boys & Girls Club for the Iowa Tribe of Kansas and Nebraska, and Hiawatha High School.

All Kids Sports Performance Combine and Education Camp

Registration and Waiver Information

(No player will be allowed to participate in the camp without a signed authorization, waiver & release)

Name _____ Age _____

Parent's Name/Address _____

Camp Date/Location _____

Phone _____ T-Shirt size Circle: S, M, L, XL, XXL

Waiver of Liability and Statement of Fitness:

The All-Kids Sports Performance Combine and Education Camp is a non-contact camp. Prior to coming to the camp, athletes should be in good condition, and well hydrated. In consideration of this entry, I certify that within the past two years, my child has had a physical examination and is physically able to participate in the camp activities without restriction. If there are any limited restrictions, such as use of inhalers, allergies, and etc., please note below. I waive, release, and discourage all claims for myself and my heirs against the All-Kids Sports Performance Combine and Education Camp and all sponsors of said camp. I understand and give my consent for medical treatment and permission to the physician to hospitalize, secure proper treatment, and order injections, and anesthesia, or surgery. I will be responsible for any medical charges in connection with my Child's attendance in the All-Kids Sports Performance and Education Combine Camp. I consent to having the participants, image, camp picture, picture or videos used in any advertising by the All-Kids Sports Performance and Education Combine Camp.

Student athlete and parent must sign waiver:

Student Signature

Parent Signature

Note: Medical issues such as inhalers, allergies, or any other medical conditions below: