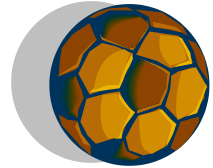


Community Unit School District 303



**2017**  
**Wredling Middle School**  
**Summer Athletic Camps**



Dear Parents,

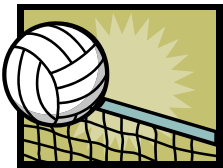
*As you know, summer is just around the corner and we are busy planning our summer athletic camps. Our camps will offer a variety of opportunities for students to improve their skills and have fun in five different sports! All summer athletic camps will be facilitated by the District 303 coaches. Students will participate in a variety of skill-building activities and will be introduced to the same plays and philosophies that they will use when participating in Wredling athletics. The philosophy of our camps is simple: Have fun, improve skills, and learn good sportsmanship!*

***Online Check, Credit Card, and Debit Card payments now being accepted.  
Please visit [d303.org](https://store.d303.org) and click on the PushCoin Web Store  
<https://store.d303.org>***

**Wredling Middle School  
1200 Dunham Road  
St. Charles, Illinois 60174**

**Tim Loversky, Principal  
Michelle Dague, Assistant Principal  
Diane Lidman, Assistant Principal**

**For additional information contact:  
WMS Athletics at 331-228-5867**



**Community Unit School District 303  
2017  
Wredling Middle School  
Summer Athletic Camp Schedule**

**Price of each camp will be \$70.00 per child. The cost of the camp will include a T-shirt! Don't miss this opportunity to have fun and learn from the Wredling Red Hawk coaches!**

**Note: Grade level determined by grade student will be as of September 2017**

	<b>Days:</b>	<b>Time:</b>	<b>Dates:</b>	<b>Meeting Place:</b>
<b>Boys Basketball:</b>				
7–8 <sup>th</sup> Grade	M–F	8:00–10:00am	July 10–14	WMS Gym
5–6 <sup>th</sup> Grade	M-F	10:00–12:00pm	July 10–14	WMS Gym
<b>Girls Basketball:</b>				
5–8 <sup>th</sup> Grade	M–F	12:30–2:30pm	July 10–14	WMS Gym
<b>Boys and Girls Volleyball</b>				
4–6 <sup>th</sup> Grade	M–F	8:00–10:00am	August 7–11	WMS Gym
7 <sup>th</sup> Grade	M–F	10:00–12:00pm	August 7–11	WMS Gym
8 <sup>th</sup> Grade	M–F	1:00–3:00pm	August 7–11	WMS Gym
<b>Football:</b>				
7–8 <sup>th</sup> Grade	M–F	8:30–10:30am	August 7–11	WMS Football Field
<b>Boys and Girls Cross Country:</b>				
6–8 <sup>th</sup> Grade	M–F	8:30–10:00am	August 7–11	WMS Gym Lobby
<b>Cheerleading:</b>				
3–8 <sup>th</sup> Grade	M–F	9:00–11:00am	August 7–11	WMS Auxiliary Gym

**Please complete and turn in the emergency form and the registration form located on the next two pages at least a week before the start of the specific camp (if you miss the deadline please email the coach directly to see if there are still openings for the camp).**

**If a refund is necessary it must be requested within 30 days of the camp.**

# Community Unit School District 303

## Registration Form

Please complete and return this **registration form** along with the **emergency information form**.

**New This Year – Electronic Check Payments Now Being Accepted!**  
Enjoy quick and easy secure online registration using a checking or savings account!

Student Name: \_\_\_\_\_ Grade Level Fall 2017: \_\_\_\_\_

Sport 1: \_\_\_\_\_ Dates: \_\_\_\_\_ Time: \_\_\_\_\_

Sport 2: \_\_\_\_\_ Dates: \_\_\_\_\_ Time: \_\_\_\_\_

Sport 3: \_\_\_\_\_ Dates: \_\_\_\_\_ Time: \_\_\_\_\_

T-shirt Size (Circle One):    Adult S        Adult M        Adult L        Adult XL

Camp Fee:                    \$ \_\_\_\_\_ (\$70.00 per camp)

Amount Enclosed:        \$ \_\_\_\_\_

Make checks payable to Wredling Summer Athletic Camps.

**Return to: Wredling Middle School  
Attn: Summer Camp  
1200 Dunham Rd.  
St. Charles, IL 60174  
331-228-3700**

### Refund Policy

- There is a \$25 processing fee for refunds.
- No refunds will be given after the second day of camp.
- A full refund will be issued if class is cancelled due to lack of enrollment or there is a documented illness or injury.
- There are no partial refunds or credits for absences.

# Community Unit School District 303

## Emergency Information

Please include the following information so that your son/daughter may receive proper care in the event of an injury/emergency:

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

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

Parent/Guardian: \_\_\_\_\_

Student ID #: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

City: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

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

Work Phone: \_\_\_\_\_

Family Physician: \_\_\_\_\_

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

Phone: \_\_\_\_\_

### Please List:

Medical Condition(s): \_\_\_\_\_

Medications Taken & Why: \_\_\_\_\_

Allergies: \_\_\_\_\_

**Please Note: There will not be a nurse on site during the summer camps. Medications will not be administered during the summer camp hours.**

### Emergency Contact (if parents cannot be reached):

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

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

### Insurance Coverage/Medical Release:

I realize that my son/daughter must be covered by our family accident/health insurance coverage for all treatment expenses. I/we give permission for the above named student to participate in organized activities, realizing that such activity involves the potential for injury which is inherent in all sports.

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

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

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

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

### Concussion Protocol:

I agree to abide by all conduct rules and will behave in a sportsmanlike manner. I agree to follow the coach's instructions, playing techniques, and training schedule as well as all safety rules.

I understand that Board policy 7:305, Student Athlete Concussions and Head Injuries, requires, among other things, that a student-athlete who exhibits signs, symptoms, or behaviors consistent with a concussion or head injury must be removed from practice or competition at that time and that the student will not be allowed to return to play or practice until he or she has successfully completed return-to-play and return-to-learn protocols, including having been cleared to return by the treating physician licensed to practice medicine in all its branches or a certified athletic trainer under the supervision of a physician.

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

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