



# 2024 Youth Field Hockey Camp

**Students Entering:** Kindergarten – Grade 8

**Dates:** July 29<sup>th</sup> - August 1<sup>st</sup>, 2024

**Times:** 9am – 12 pm

**Location:** Rocco Ortenzio Stadium, Bishop McDevitt High School

1 Crusader Way - Harrisburg, Pa. 17111

**Cost:** \$50 per camper includes T-shirt

Any questions, please contact Coach Steve at [fieldhockey@bishopmcdevitt.org](mailto:fieldhockey@bishopmcdevitt.org)

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## Registration:

Name of Participant: \_\_\_\_\_

2024/25 Grade and School: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact Name and Phone Number: \_\_\_\_\_

T shirt size: YS \_\_\_\_\_ YM \_\_\_\_\_ YL \_\_\_\_\_ AS \_\_\_\_\_ AM \_\_\_\_\_ AL \_\_\_\_\_ XL \_\_\_\_\_

**(Deadline to guarantee a t-shirt size is: Monday, July 8<sup>th</sup>)**

## Waiver:

I request that you accept this application for \_\_\_\_\_ to participate in the Bishop McDevitt Field Hockey Youth Camp. I authorize camp director Steve Heckman to use his best judgement in emergency situations. To my knowledge, \_\_\_\_\_ is physically able to participate in the activities while attending camp. I also understand that she must be covered by the family health insurance. I waive any and all claims against Bishop McDevitt High School and camp staff for injuries sustained during or resulting from participation in this camp.

Signature and Date of Parent or Guardian: \_\_\_\_\_

**\*\* Please make checks payable to: Bishop McDevitt Field Hockey.**

Mailed to: Steve Heckman, 6111 Blue Grass Avenue, Harrisburg, PA 17112