



# PV Field Hockey/Summer Camp

**Come play an exciting and challenging sport!**

For updated information go to my website

<http://pvhs.chicousd.org/subsites/Bill-Flory/Field-Hockey/index.html>

**TRYOUTS:** begin Monday, Aug 12 from 2:30-4:30 on Asgard Yard

**PV SUMMER CAMP:** Will include 3 sessions, June 19, 20, July 9, 10 from 8am - 1pm, and July 31, Aug 1, 2, 5, 6, 7 from 8-noon.

**Attire:** Dress for physical activity, bring running shoes, and cleats or turf shoes, a stick, shin guards, a full water bottle, sun screen, mouth piece, and once issued, the reversible tank top. (sticks available to borrow) The camp will include instruction for the beginner through advanced level player. Players can expect to improve their playing ability through individual and group activities: including stick skills and drills, proper conditioning techniques, offensive and defensive scrimmage and game play. Each camper will receive a PV Camp reversible tank top.



**Cost:** Pre-registration \$120 (before Jun 6<sup>th</sup>), Walk-up registration \$140. Athletes attend all the sessions they can for the one price. No deductions for missed sessions. Turn in completed form and money (make checks payable to **ASB - PV Field Hockey**) to Pam Jackson or Bill Flory at PVHS, 1475 East Ave, Chico, CA 95926.

**Questions:** email Coach Bill Flory at [bflory@chicousd.org](mailto:bflory@chicousd.org)

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Name \_\_\_\_\_ Grade 2019-20 School Year \_\_\_\_\_

Parent Name \_\_\_\_\_ Parent Email \_\_\_\_\_

Phone # \_\_\_\_\_ Yrs. of Exp. \_\_\_\_\_ T-Shirt Size (S,M,L ladies) \_\_\_\_\_

Any special medical conditions \_\_\_\_\_

I hereby authorize the directors of the Pleasant Valley Field Hockey Camp to act for me according to their best judgment in any emergency requiring medical attention.

By my signature here, I attest that I have read this statement and waive any and all claims and release the School, School District, Camp, Coaches or Director from any and all injuries I may suffer as a result of participation in the Pleasant Valley Field Hockey Summer Camp; and travel to and from said event. I further attest that I will take responsibility to insure that I am physically fit to participate in said event.

Player Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_