

7007 E. Bayou Gulch Rd.
Parker, CO 80134



303-387-4106 (Office)
303-387-4101 (Fax)

PONDEROSA ATHLETICS

Athletic Director – Tim Ottmann
Athletic Secretary – Sandy Mira

SUMMER WEIGHT TRAINING

JUNE 1 – JUNE 24/JULY 5 – JULY 29

(The weight room is closed the week of June 28 – July 4)

WEEK ONE – Tuesday through Friday

ALL OTHER WEEKS – Monday through Thursday

ALL FOOTBALL PLAYERS WILL HAVE THEIR OWN SESSION BEGINNING AT 7 AM

Session 1

8:30 to 9:30 am

or

Session 2

9:45 to 10:45 am

Open to grades 7-12

COST: \$75.00

To register, please fill out the registration/release form and turn into the athletic office prior to June 1.

**For information, please contact Tim Ottmann,
Athletic Director at 303-387-4100 or by email at**

tim.ottmann@dcsdk12.org

Home of the Mustangs

2010 Ponderosa Summer Weight Training Camp Registration

Please Print. Do not include more than one participant per registration form; use blank form to make copies for additional participants. Please mail or bring in registration forms and checks to the Athletic Office, or the Camp Instructor.

Student's Name _____ Age _____

Parent/Guardian's Name _____

Address _____

Street _____ City _____ Zip code _____
Phone Number _____ Work Number _____

School student now attends _____ Grade (as of 2010-2011 School Yr.) _____

Emergency Information: If we cannot contact parents, call:

Name _____ Phone _____

Relationship _____

Family Doctor _____ Phone _____

Sport(s) in which you participate? _____

I/we (print parents names) _____ in return for my child's opportunity to participate in the 2010 Ponderosa Summer Weight Training Camp do hereby exempt and release the Douglas County School District, its directors, officers, employees, and agents from any and all liability, claims, demands or actions whatsoever arising out of any damage, loss or injury that my child or I/we might sustain while my child is participating in the 2010 Ponderosa Summer Weight Training Camp, whether or not such damage, loss or injury results from the negligence of Douglas County School District, its directors, officers, employees, volunteers or agents or any defective equipment. I/we understand that if I/we do not sign this release, then my child will not be permitted to participate in the 2010 Ponderosa Summer Weight Training Camp. I/we hereby represent that I am/we are 18 years of age or older, and that I am/we are the parent(s)/guardian(s) of (insert child's name here) _____ . I/we further acknowledge that no representation or promises by Douglas County School District representatives have been made to induce me to sign this release.

X _____
Signature of Student _____ Date _____

X _____
Signature of Parent or Guardian _____ Date _____

CAMP ACTIVITIES INSURANCE WAIVER

I fully understand the Douglas County School District Re. 1 does not provide health or life insurance coverage for the above named student while he/she is participating in camp activities. I/We further understand that it is my/our responsibility to provide adequate insurance coverage to the above named student.

X _____
Signature of Parent or Guardian _____ Date _____

Please make checks payable to Ponderosa High School. Your processed check will be your receipt. All returned checks will be assessed a \$20.00 charge.

PLEASE SELECT YOUR SESSION

_____ Football Session 7 am
_____ Session I, 8:30 – 9:30 a.m. _____ Session II, 9:45 – 10:45 a.m.