

2018 WILLOWBROOK SUMMER CAMPS

	GRADE	START DATE	END DATE	TIME	DAYS	COACH	FEE	LOCATION
Strength and Agility	9-12	6/04/18	6/22/18	1:00 PM-2:30 PM	M,T,W,TH,F	Mr. Hildreth	\$20	Fitness Center
WRESTLING	9-12	6/04/18	6/14/18	10:00 AM- 12:00PM	M,T,W,TH	MR. Murphy	\$100	Wrestling Room
	3-8	6/04/18	6/14/18	10:00 AM- 12:00PM	M,T,W,TH	MR. Murphy	\$65	
GIRLS TRACK	6-12	6/04/18	6/29/18	9:30 AM- 11:30 AM	M,W,F	MR. WARE	\$90	Stadium
BOYS SOCCER	9-12	6/04/18	6/14/18	11:00 AM-1:00 PM	M,T,W,TH	MR. DE LA CRUZ	\$65/wk	STADIUM
GIRLS SOCCER	9-12	6/04/18	6/14/18	9:00 AM - 11:00 AM	M,T,W,TH	MR. DEL REAL	\$125	STADIUM
BASEBALL	3-5	6/04/18	6/14/18	8:00 AM-10:00 AM	M,T,W,TH	MR. WISNER	\$150	or \$75/week
	6-8	6/04/18	6/14/18	8:00 AM-10:00 AM	M,T,W,TH	MR. WISNER	\$150	or \$75/week
	9	6/04/18	6/14/18	1:00-2:30 PM	M,T,W,TH	MR. WISNER	\$140	BASEBALL FIELD
GIRLS Volleyball	5-8	6/04/18	6/14/17	5:00 PM-7:00 PM	M,T,W,TH	MRS. MASON	\$150	WILLOWBROOK
	9-12	6/04/18	6/14/18	3:00 PM-5:00 PM	M, T,W,TH	MRS. MASON	\$150	GYMS
MINI CAMP	9-12	7/16/18	7/18/18	9:00 AM-12:00 PM	M,T,W	MRS. MASON	\$70	
BOYS	3-8	6/04/18	6/14/18	10:00 AM-12:00 PM	M,T,W,TH	MR. PERKINS	\$120	WILLOWBROOK
BASKETBALL	9-12	6/04/18	6/14/18	7:30-9:30 AM	M,T,W,TH	MR. PERKINS	\$135	GYMS
Summer League	9-12	Must Be In	Camp	To Play Summer	League	MR. PERKINS	\$135	TBA
GIRLS	9-12	6/04/18	6/14/18	8:00-10:00 AM	M,T,W,TH	MR. HARRELL	\$125	WILLOWBROOK
BASKETBALL	3-8	6/04/18	6/14/18	10:00 AM-12:00 PM	M,T,W,TH	MR. HARRELL	\$100	GYMS
Summer League	9-12	Must Be In	Camp	To Play Summer	League	MR. HARRELL	\$125	TBA
FOOTBALL	Varsity	6/25/18	07/27/18	12:30 PM-4:00 PM	M,T,W,TH,F	MR. HILDRETH	\$150	WILLOWBROOK
	Soph	07/09/18	07/27/18	4:00PM-7:00 PM	M,T,W,TH,F	MR. HILDRETH	\$100	PRACTICE FIELDS
	Fresh	07/09/18	07/27/18	4:00PM-7:00 PM	M,T,W,TH,F	MR. HILDRETH	\$100	and STADIUM
	3rd-5th	07/16/18	07/17/18	6:00PM-7:30PM	M,T	MR. HILDRETH	\$20	
	6th-8th	07/18/18	07/19/18	6:00PM-7:30PM	W,TH	MR. HILDRETH	\$20	
BADMINTON	10-12	6/04/18	6/14/18	1:00 PM-3:00 PM	M,T,W,TH	MR. MURPHY	\$100	WILLOWBROOK
	6-9	6/04/18	6/14/18	3:00 PM-4:30 PM	M,T,W,TH	MR. MURPHY	\$100	FIELDHOUSE
	3-5	6/04/18	6/14/18	3:00 PM-4:30 PM	M,T,W,TH	MR. MURPHY	\$65	
BOYS CROSS COUNTRY	7-12	6/04/18	6/14/18	7:30- 9:00 AM	M,T,W,TH	MR. ARTMAN	\$75	WILLOWBROOK
GIRLS CROSS COUNTRY	7-12	6/04/18	6/29/18	7:00- 9:00 AM	M,W,F	MR. WARE	\$90	PARK
SOFTBALL								Softball Field
	9-12	6/04/18	6/14/18	10:00 AM-11:45 AM	M,T,W,TH	MS. KAROS	\$130	or \$65/ week
	3-8	6/04/18	6/14/18	8:00 AM-9:45 AM	M,T,W,TH	MS. KAROS	\$130	or \$65/ week
GIRLS GOLF	6-12	6/18/18	6/21/18	8:00-9:30 AM	M,T,W,TH	MR. WHITE	\$50	WILLOWBROOK
BOYS AND GIRLS TENNIS	5-12	6/04/18	6/08/18	9:00 AM-11:00 AM	M,T,W,TH,F	MR. DE LA CRUZ	\$70	TENNIS COURTS
	5-12	6/11/18	6/15/18	9:00 AM-11:00 AM	M,T,W,TH,F	MR. DE LA CRUZ	\$70	TENNIS COURTS
CHEERLEADING	K-8	7/16/18	7/20/18	4:30 PM-6:30 PM	M,T,W,TH,F	MS. Jarzembowski	\$75	MAIN GYM
BOYS	7-12	6/04/18	6/07/18	1:00-3:00 PM	M,T,W,TH	MR. BAZON	\$75	WILLOWBROOK
VOLLEYBALL	7-12	6/11/18	6/14/18	1:00-3:00 PM	M,T,W,TH	MR. BAZON	\$75	GYMS
COLOR GUARD	9-12	7/23/18	7/27/18	10:00AM-2:00PM	M,T,W,TH,F	MRS. GUZA	\$20	BAND ROOM
POMS	K-8	7/09/18	7/13/18	9:00-11:00 AM	M,T,W,TH,F	MS. LAMB	\$100	GYM
BOYS GOLF	9-12	TBD	TBD	TBD	M,T,W,TH,F	MR. WALKER	\$165	M-TH Bolingbrook

For information please contact Coach Walker at gwalker@dupage88.net We must have 10 Golfer to run this camp

Fri: Suger Creek

ALL REGISTRATION MUST BE DONE THROUGH THE WILLOWBROOK ATHLETIC OFFICE (WALK IN OR MAIL BY June 1, 2018): 1250 S. ARDMORE AVE., VILLA PARK, IL 60181 PLEASE MAKE CHECKS PAYABLE TO WBHS. PLEASE CIRCLE CAMP & AGE OF PARTICIPANT.

Sport: _____
Amount _____
Ck. _____ Cash _____

SUMMER ATHLETIC REGISTRATION
2018
WILLOWBROOK HIGH SCHOOL
PARENT/STUDENT CONSENT FORM

Write name of all sports in which you will be participating. Please circle sport and grade on back.

Summer: _____

Name (Last) _____ (First) _____ Age _____

Year in School: Fr. So. Jr. Sr. Other _____ (Please Circle) Male _____ Female _____

Street Address _____ City _____ Zip _____

Telephone Number _____ Birth Date _____

Father's Name and Address _____

Mother's Name and Address _____

NON-WILLOWBROOK STUDENT INSURANCE INFORMATION

****All transfer students must prove residency before taking part in Summer Camp. It is the responsibility of the parent/guardian to provide family insurance coverage for their student's participation in athletics. Furthermore, I understand that School District #88 does not assume financial responsibility for accidents incurred in athletics/activities.**

WILLOWBROOK STUDENT INSURANCE INFORMATION

DuPage High School District #88 has purchased Student Accident Insurance Coverage for all Willowbrook students. This program provides coverage for students for any injuries incurred while participating in school sponsored and/or supervised activities, including athletics. If students have other insurance coverage, District 88 coverage is secondary.

EMERGENCY MEDICAL INFORMATION

In the event of a medical emergency and if reasonable attempts to contact me using the telephone numbers listed above are unsuccessful:

I, as a parent or legal guardian of the above student, do hereby authorize:

1. Treatment by a licensed medical physician of my child/ward in the event of a medical emergency that in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed, and
2. Transfer my child /ward to any hospital accessible at my expense.

Parent/Guardian Signature

Date

PARENT/STUDENT CONSENT

Applicable to High School Students Only

I am familiar with and have received and read the School District #88 Student Code of Conduct and the Illinois High School Association information summarizing rules and regulations regarding athletic eligibility and participation. I am aware that with participation in sports comes the risk of injury, and I understand that the degree of danger and seriousness of risk vary significantly from one sport to another with contact sports carrying the highest risk. I am aware that participating in sports involves travel with the team. I acknowledge and accept the risks inherent in the sport(s) or athletics in which I will be participating and in all travel involved. I agree to hold the District, its employees, agents, coaches, School Board members, and volunteers harmless from any and all liability, actions, claims, or demands of any kind and nature whatsoever that may arise by or in connection with my participating in the school-sponsored interscholastic sport(s) or intramural athletics. The terms hereof shall serve as a release and assumption of risk for my heirs, estate, executor, administrator, assignees, and for all members of my family.

I hereby give _____ permission to participate in the above listed sports.

Parent/Guardian Signature _____ Student _____

Date: _____