

## Health Information

Does your child have any of the following? (Please place an X where appropriate)

### Allergic Reactions

Bee Stings [ ]  
Food [ ]  
Other [ ]

Please Specify: \_\_\_\_\_

### Conditions

Asthma [ ]  
Seizures [ ]  
Heart Problems [ ]

Describe Reaction: \_\_\_\_\_  
\_\_\_\_\_

Medication Used: \_\_\_\_\_

### Other Health Problems

Does your child have any physical limitations that may require program modification or restrictions? Yes \_\_\_\_\_ No \_\_\_\_\_

Please add any other problems that your child may have and the necessary steps to be taken to ensure his or her safety.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In any emergency when the parent or alternate is not available, your child will be transferred to St. Luke's Hospital by ambulance. Please discuss any health problems with your program director or his designee before the start of the camp.

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



# Dartmouth

## Summer Sports Camps 2017

**Director**

Sam Madden  
(508)742-7767

[williammadden@dartmouthschools.org](mailto:williammadden@dartmouthschools.org)

## Camp Dates

**June 26-30**

**@ Dartmouth Middle School**

Baseball (Entering Gr. 2-9)  
Field Hockey (Entering Gr. 2-9)

**July 3-7 (No Camp on July 4)**

**@ Dartmouth High School**

Football (Entering Gr. 2-9)  
*No Helmets or Pads*  
Tennis (Entering Gr. 2-9)  
Girls Basketball (Entering Gr. 2-9)

**July 10-14**

**@ Dartmouth Middle School**

Girls Lacrosse (Entering Gr. 2-9)  
Boys Basketball (Entering Gr. 2-9)

**July 17-21**

**@ Dartmouth Middle School**

Volleyball (Entering Gr. 5-9)  
Soccer (Entering Gr. 2-9)

**July 24-28**

**@ Dartmouth Middle School**

Softball (Entering Gr. 2-9)  
Track and Field (Entering Gr. 2-9)

## Camp Information

All camps are \$80.00

(July 3-7 is \$65.00)

All camps are 9am-Noon

Campers must be registered at least one week prior to attending camp.

An additional \$10.00 fee will be added to campers that are registering within one week of the start of camp.

**Sign up and pay for 4 Weeks of Camp and get 1 Week Free per family.**

## Checklist to Register For Camp

- [ ] Make checks payable to:  
Town of Dartmouth/  
Summer Sports Camp
- [ ] Registration Form,  
Emergency and Health  
Information (One per  
camper)
- [ ] Checks mailed to:  
  
Sam Madden  
366 Slocum Rd  
Dartmouth, MA 02747

## Camp Registration Form

*One form per camper  
Detach this side and mail with payment*

Camper's Name: \_\_\_\_\_  
Grade Entering: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone #: \_\_\_\_\_  
Email: \_\_\_\_\_

### Emergency Information

Emergency Contact Person

#1 Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Cell Phone# \_\_\_\_\_  
Work # \_\_\_\_\_  
  
#2 Name \_\_\_\_\_  
Relationship \_\_\_\_\_  
Cell Phone# \_\_\_\_\_  
Work # \_\_\_\_\_

**Register online at the Dartmouth  
High School Website**