

# Camp Schedule: July 8, 9, 10

**Water Polo 8:00 a.m.-10:30 a.m.**

**Offered by Knight Head Coach Dave Eisenstein  
State Runner-up in 2004**

Day 1: Fundamentals of the game; Rules and Regulations

Day 2: Various offense and defense drills; Running the offense, half scrimmage

Day 3: Technical offense and defense; full scrimmage as time allows

**Swimming 10:30 p.m.-12:00 p.m.**

**Offered by Knight Head Coach Keith Kennedy**

**Northwest District Titles 2007, 2006, 2005, 2004, 2003, 2002, 2001, 2000, runner up 2008**

Day 1: Basic drills in all four strokes; Goal Setting

Day 2: Starts and Turns; Team Building

Day 3: Stroke analysis; Video session



**ENROLLMENT:** Open to all boys beginning grades 5-9 in fall, 2008. Open to swimmers of all ability levels. Swim ability--must be able to swim a 50 Free.



**INSURANCE:** Each camper should have his own medical insurance. Neither the camp nor St. Francis will carry any policies covering young men participating.



**MEDICAL POLICY:** There is always the possibility of injury. Any serious injuries will be referred to the parents and their family doctor. The attached medical release will allow a doctor to treat the athlete in the event a parent or guardian isn't available.



**PHYSICALS:** No physicals are required. Parents are asked to use their judgement about the health of their sons.

## REGISTRATION FORM

Please return this form with a check for \$50 (made to *Keith Kennedy*) before June 10 to Swin Camp, St. Francis de Sales High School, 2323 W. Bancroft, Toledo, OH 43607. After that date, please contact coach Kennedy at 419 531-7121 or [kkjrswim@yahoo.com](mailto:kkjrswim@yahoo.com).

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ City, State, ZIP \_\_\_\_\_

E-Mail \_\_\_\_\_ Phone: \_\_\_\_\_

T-shirt & snack  
provided.

8:00-10:30 Water Polo  
Coached by Head Coach Dave Eisenstein

10:30-12:00 noon Swimming  
Coached by Head Coach Keith Kennedy



Snack provided



July 8, 9, and 10 8:00 a.m.-12:00 p.m

# St. Francis de Sales High School Summer 2008 Water Polo and Swim Camp

St. Francis de Sales High School  
2323 W. Bancroft Street  
Toledo, OH 43607

## MEDICAL EMERGENCY FORM

I give my consent and approval for my son \_\_\_\_\_ to participate in the Knight Swim/Water Polo Camp. I certify that he is physically fit to take part in the activities of camp. I have adequate medical insurance for medical expenses that may result from any injury sustained while he is participating in the camp activities. I agree not to hold St. Francis de Sales High School or any individual from the school or the camp staff members responsible for such expenses.

I authorize emergency medical treatment for my son in the event he needs such treatment and I am unavailable to give consent.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Emergency phone numbers: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_