**2024 CLEAR LAKE HIGH SCHOOL GIRLS**

**S**peed **W**eight and **A**gility **T**raining

**DATES:** June 11th, 12th, 13th July 16th, 17th, 18th

June 18th, 19th, 20th July 23rd, 24th, 25th

June 25th, 26th, 27th July 16th, 17th, 18th

No SWAT the week of July 2nd and July 9th

**SCHEDULE:** 9th -12th Grade 7:30 -9:00 am

7th & 8th Grade 9am to 10am

**PARTICIPANTS:** \***Incoming 7th – 12th grade Girls** - All Sports

**LOCATION:** Clear Lake HS Football Field

**COST:** \*One payment of $75(Due now)

\*Must have a physical on file dated after April 1st

\*Athletic attire is required

Please Bring a Large Water container FULL of water for you to use the entire workout.

**Questions – Contact**

**Lisa Killingsworth \* Camp Director**

**281-284-1960 \*** [**lmanis@ccisd.net**](mailto:lmanis@ccisd.net)

**Register and Payment through RankOne. Use QR code for registration form.**

A qr code with black squares

Description automatically generated

\*\*\*Clear Creek ISD does not carry insurance for summer fitness/recreation programs. Parents/Guardians will be responsible for any medical expenses incurred.\*\*\*

Grade Fall 2024\_\_\_\_\_\_\_\_\_\_

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Cell #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Work #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Camp Waiver (Parent or Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_