



**MSGR. EDWARD
PACE
HIGH SCHOOL**

SPARTAN BOOTCAMP

Summer Edition



CAMPS SPORTS & ACTIVITIES

Camp	Ages	Date	Cost	Contact
Basketball	6-15	June 11-14 & June 18-21 (9am-2:30 pm)	\$100 - One Week \$175 - For Both Weeks	Coach Anthony Serro basketball@pacespartans.com
	Pace Students Only <i>(Including incoming 9th graders)</i>	June 18 – 25 & June 25-28 (4pm-7pm)	\$150 - One Week \$250 - For Both Weeks	
Football	6-15	June 25-July 27 Monday-Friday 8am-12pm	\$75 per week (one time \$25 Registration Fee)	Quinton Andrews quintonandrews@gmail.com
Theatre Summer Camp	11 – 16	June 18 – 29 (2 wks/week days only)	\$350 – Early Registration (by June 8 th) \$400 – After June 8 th	Ms. Marianne Martinez mmartinez@pacehs.com
Volleyball	10 – 18 14 – 18	July 23 – 26 (Girls - Ind. or Team. Camp) July 30 – Aug 2 (Boys - Ind. or Team Camp)	Girls - \$50 Ind. Or \$200 Boys - \$50 Ind. or \$250 <i>(Individuals will be placed on a team)</i>	Coach Markia L. Brown-Seetal coachbrownseetal@yahoo.com

ENRICHMENT COURSES FOR HIGH SCHOOL CREDIT

Course	Cost	Ages	Date	Contact
Physical Education HOPE (1 credit)	\$800 (Full day – 4 weeks)	Grades 7 - 12	June 18 - July 13 (No School – July 4)	Mrs. Giberson cgiberson@pacehs.com
Computer Technologies (1 credit) [Virtual or On-campus]	8:00-11:30am & 12:00-3:30pm			
(0.5 credit) Morality World Religions Economics Spirituality in the Sacraments Catholic Social Teaching American Government Writing	\$400 (Half days - 4 weeks)			

Sign up today while space is available by contacting the coach/moderator listed.



15600 NW 32 Avenue ~ Miami Gardens, FL 33054 305.623.PACE www.PaceHS.com



Enrichment Summer School Application 2018: June 18 - July 13 (No School July 4)

Student Information			
Student Name			
Home Address / Apt. City, State Zip			
School			
Entering Grade	<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	ID #	
Parent(s)/Guardian(s)			
Home Phone		Cell Phone	
Email			
Emergency Contact			
Emer. Con. Home #		Emer. Con. Cell #	
Name(s) of person(s) other than parents/guardians with permission to pick up my child during school hours:			

Class Information	
Cost: \$400 per session. \$800 for two sessions.	
Please check off the course(s) you would like to sign up for. Only one class per session is allowed.	
Morning Session: 8:00 – 11:30 a.m.	Afternoon Session: 12:00 – 3:30 p.m.
<input type="checkbox"/> HOPE PE (HOPE PE is two sessions – morning and afternoon)	
<input type="checkbox"/> Computer Technologies (morning and afternoon – 2 sessions - \$800)	
<input type="checkbox"/> Computer Technologies (Virtual) (morning and afternoon – 2 sessions - \$800)**	
**Students must be present on June 18 th for orientation.	
**Must have access to Microsoft 2013 or 2016 & be able to install software on the computer.	
<input type="checkbox"/> Morality	<input type="checkbox"/> Spirituality in the Sacraments
<input type="checkbox"/> World Religions	<input type="checkbox"/> Catholic Social Teaching
<input type="checkbox"/> Economics General/Honors	<input type="checkbox"/> American Government General/Honors
	<input type="checkbox"/> Writing

Payment Information (Cost: \$400 per session. \$800 for two sessions.)					
Amount Paid	\$	Balance:	\$	Payment Type:	<input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit
Credit Card Payment Information:					
Card Holder		Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> AMEX <input type="checkbox"/> Discover		
Card Number		Exp. Date		Security Code	
Signature		Processed By			

Msgr. Pace High School Student-Parent Handbook rules apply.			
Visit http://www.pacehs.com/handbook.php for more details. If rules or regulations are violated, you will be sent home and the day will count as an unexcused absence. Only <u>one</u> absence will be allowed during the summer session. School uniform and proper shoes or sneakers must be worn at all times. There will be NO school July 4, 2018.			
Acknowledgment: We, the undersigned, understand and agree to abide by Msgr. Pace High School's Student-Parent handbook rules and regulations and have read this form and understand all its terms and execute it voluntarily and with full knowledge of its significance. In the event of an emergency, if I/we cannot be contacted, I hereby authorize treatment be administered.			
Parent Signature:		Date:	
Student Signature:		Date:	

Summer School Orientation will be in the Spartan Center on Monday, June 18, 2018 at the start of each session

Consent & Release Form - Page 1

STUDENT INFORMATION

Participant Name:		Student Cell:	
Date of Birth:		ID #:	
Home Address:			
City, State Zip:			

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1:		Parent/Guardian 2:	
Home Phone:		Home Phone:	
Cell Phone:		Cell Phone:	

EMERGENCY CONTACT (DIFFERENT FROM THE PERSONS LISTED ABOVE)

Emergency Contact:		Relationship:	
Address:		Home Phone:	
City, State Zip:		Cell Phone:	

MEDICAL INFORMATION

Doctor's Name:		Phone:	
Insurance Provider:		Policy#:	

Allergies/Medical Conditions: (Medication: If you are taking medication regularly, please bring a supply in the official **LABELED** container)

DESCRIPTION OF FIELD TRIP/ACTIVITY

I give my child permission to participate in:	SPARTAN BOOT CAMP 2018		
Select which camp:	<input type="checkbox"/> BASKETBALL <input type="checkbox"/> FOOTBALL <input type="checkbox"/> THEATER <input type="checkbox"/> VOLLEYBALL <input type="checkbox"/> ENRICHMENT COURSE		
Date of Event:	Summer 2018:	Transportation Provided By:	Parent/Student
Location of Event:	Msgr. Edward Pace High School and any additional field trip location included with the camp.		

I, the undersigned, have read this consent/release (Page 1 & 2) and understand all its terms and execute it voluntarily and with full knowledge of its significance. In the event of an emergency, if I cannot be contacted, I hereby authorize medical treatment be administered. I acknowledge that a student placed on the school's merit/demerit probation contract or a student with outstanding financial and/or graduation obligations may not be allowed to register for or participate in any extracurricular events/activities.

All tuition and fees must be up-to-date to register for and participate in this event/activity. Any monies paid or deposited for a student event/activity are non-refundable. I also understand that if my balance is not paid in full and/or my child is not able to attend this event/activity, I am still responsible for paying any fees for which Pace is liable for whether or not my child attends the event/activity.

Parent/Guardian Signature:		Date:	
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**** PLEASE READ AND SIGN PAGE 2 OF THIS FORM. ****

Monsignor Edward Pace High School - Consent and Release - Page 2

I hereby freely and voluntarily consent to participation in the field trip/activity described on page 1. I agree to assume all financial responsibility for participation in the field trip/activity and hold Monsignor Edward Pace High School, Archdiocese of Miami, Inc., and all of their corporate members, affiliated entities, employees, officers, directors, and agents ("Sponsors") harmless for all costs incident to my participation in this field trip/activity.

I, the undersigned, a participant in the field trip described on page 1, do waive and release Sponsors from liability for any injury, accident, or damages caused by any vehicle, weather, sickness, or otherwise stemming from any act or omission of any individual. I also release Sponsors and agree to indemnify them with regard to any financial obligations incurred by my acts or omissions.

I understand that all travel involves some risk, and I hereby agree to assume and consent to such risk. I hereby waive and release Sponsors for any injuries, damages, or losses incurred in connection with actions, omission or conditions or developments, or any other actions, omissions or conditions within or outside Sponsors' control. By my participation in this program, I voluntarily assume all risks involved in such travel, whether expected or unexpected. I hereby acknowledge that I have been warned of such risks, and that I have been advised to take appropriate action and to govern myself accordingly. I am also aware that certain insurance companies do offer insurance against some of the many perils noted and that I may opt to insure myself should I so choose.

I hereby grant Sponsors full authority to take whatever actions they may consider in their sole discretion to be warranted under the circumstances concerning my health and safety and I specifically and fully release each of them from any liability for such decisions or actions as may be taken in connection therewith. I authorize Sponsors at their discretion to place me, at my own (or my parents' or my guardians') expense and without further consent, in a hospital that is readily available, and to place me in the hands of a local physician for treatment should the need arise at my expense.

I agree to comply fully with the rules of Sponsors and any travel company and I agree that Sponsors have the right to enforce their standards of conduct as determined and interpreted in their sole discretion, and that, should I fail to comply with them, Sponsors have the right to terminate my participation in the program. In the event of termination, I agree to be sent home at my parent(s)/guardian(s) expense. I understand that this is an organized program and that group standards must be observed. I hereby waive and release Sponsors from any claim arising out of my failure to remain under such supervision. In addition, I acknowledge the right of Sponsors to terminate my participation at any time of failure to maintain standards or for any actions or conduct for which Sponsors deem incompatible with the interest, harmony, comfort, and welfare of other students. I specifically agree not to bring any weapons or illegal drugs with me on the field trip/activity.

If I violate any rules, I understand that Sponsors will apply the school consequences in addition to any consequences incurred by law enforcement. Any additional expenses, including legal expenses, incurred due to breaking any international, national or state laws and/or of the school rules will be my responsibility or that of my parents or guardians.

I acknowledge that Sponsors are not responsible either for any injury or loss whatsoever suffered by me during periods on independent travel or during any absence from the program of Sponsors. I also acknowledge that I am responsible for my own belongings including electronics. Sponsors are not responsible for loss or damage to any of my personal property.

All references in this release to Sponsors shall also include all of their chaperones, group leaders, faculty members, administrators, volunteers, and agents. All references to the "parents" of the participant include the legal guardians or other adults responsible for the participant.

I hereby grant to Sponsors the right to photograph and/or videotape me and further to use my name, face, likeness, voice, and appearance in connection with exhibitions, publicity, advertising, and promotional materials without any reservation, limitation, or consideration. This waiver specifically releases any common law causes of action or claims under Fla. Stat. 540.08 and expressly constitutes written consent for publication of my name, face, likeness, voice and appearance.

I have read the terms and conditions set forth by Sponsors and I agree that this constitutes a part of any agreement with Sponsors. I understand and agree to all of Sponsors' terms as set forth in the descriptive information and in this Release. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of Participant:	
Print Name:	
Date:	

I certify that I am the parent or legal guardian of the above-signed participant, and that I have read the foregoing release and examined the information in the description. I hereby join in each and every part of this Consent and Release (including such part as may subject me to personal financial responsibility) and hereby relinquish any claims that I may have against Sponsors as set forth above, both in my own behalf and in my capacity as legal representative (as applicable) of the participant, including without limitations any claims arising as a result of the participant's leaving the supervision of Sponsors. I agree that if any portion of this document is found to be void or unenforceable, the remaining portions shall remain in full force and effect.

Signature of Parent(s)/Guardian(s):	
Print Name(s):	
Date:	