

# O.B.Y.G. Sports Camps and Evening Clinics Registration Form

Camper Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M F

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

Local Address: \_\_\_\_\_ Home Address: \_\_\_\_\_  
\_\_\_\_\_

Local phone: (\_\_\_\_\_) \_\_\_\_\_ Cell phone: (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_ Check here if enrolling multiple campers and fill out a separate form for each camper

**Camp Fees:** A \$230.00 payment is required with each application at the O.B.Y.G. camp office by **Friday, August 19.**  
A \$15.00 administrative fee will be added for those who register on the first day of camp.  
A daily rate of \$80 for morning or afternoon sessions and \$40 for the evening session is available

- \$230 – O.B.Y.G. All Sports/Big Kick Soccer Camp — August 22-25  
A.M Ages 4-8 yrs. Time: 9:30- 12:00 pm  
P.M Ages 9-14 yrs. Time: 1:30- 4:00 pm
- \$230– O.B.Y.G. All Sports/Big Hit Baseball Camp — August 29 – September 1  
A.M Ages 4-8 yrs. Time: 9:30- 12:00 pm  
P.M Ages 9-14 yrs. Time: 1:30- 4:00 pm
- \$110 – Super Star Sports Clinic — August 22-25 Ages: 6 -14 Time: 5:30 – 7:00 pm  
Choose one:  Lacrosse  Boys Basketball
- \$110 – Super Star Sports Clinic — August 29- Sept. 1 Ages: 6 -14 Time: 5:30 – 7:00 pm  
Choose one:  Football  Girls Basketball
- \$ \_\_\_\_\_ Camper Total \*\*\*\*\*\$ \_\_\_\_\_ Family Total\*\*\*\*\*

**Medical Waiver:**

My son/daughter is in good health and is able to participate in all activities associated with the camp.

**Parent/Guardian Signature:** \_\_\_\_\_

**Payment Information:** Cash, Check, or Credit Card - Make checks payable to: *O.B.Y.G.*

Credit Card Type:  Visa  MasterCard  
Total Amount charged to Credit Card: \$ \_\_\_\_\_ Name on Card: \_\_\_\_\_  
Credit Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**O.B.Y.G. – PO Box 631 Ocean Beach, New York 11770**  
**Phone: 631-583-5300 [www.OBYG.org](http://www.OBYG.org)**