

# Torrance Unified School District

## West High School – 2023 Summer Camps & Activities

Open to all returning and new enrolling students.

Prior Participation in camps is not required, all students welcome.

Dates and times vary. See specific times and locations listed below. For more detailed information and for up to date schedules please visit the <https://www.tusd.org/schools/west-high-school>

Contribution per Student/Athlete is **\$175.00 for the 1<sup>st</sup> camp** and **\$125.00** for each additional camp selected. Cash or check accepted. Make checks payable to **TUSD**

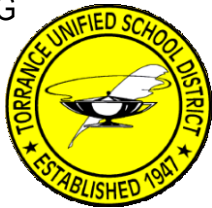
All interested students need to complete the enrollment application and return to the West High athletic/business office before beginning the camp. Please see the school site for office hours for form submissions. Form and contributions must be submitted prior to participation.

TUSD will not exclude any student due to inability to provide financial contribution.

***For financial waivers or assistance, please contact: [Druten.Jason@tusd.org](mailto:Druten.Jason@tusd.org)***

Sport	TIME		LOCATION
Boys' Volleyball	12-2pm	TWF	Main Gym
Baseball	10-11:30am.	M-Thurs	Baseball field
Boys basketball	10-3pm	M-F	Gym or Pav & Weight Room
Golf (B&G)	2-5pm	T,W,Th	Alondra Golf Course
Football	3-6 pm	M-F	Football Field
Boys' Soccer	Varsity	MW- 6-8pm F 3-6pm	Stadium
Boys' Soccer	JV/FS	TuTh 1-3pm F 3-6pm	Stadium
Water Polo(B&G)	6-8 am	M-F	June 26th-July 21st (District Pool)
Swim (B&G)	7:30-9:00am	M-F	June 26th-July 21st (District Pool)
Cross Country (B&G)	Boy 6:30am Girls 7am	M-F	Track
G Basketball	8-11 am	M-F	Gym or Pavilion
G Flag Football	10:30-11:30	M—TH	Stadium
G Soccer	9-10:30	M-Th	Stadium
G Volleyball	7-11:30	M-F	Main Gym
G. Tennis	3-5 pm	M-F	Returning Players
Softball	9-11am	Tu, Wed, Thur	Softball Field
Wrestling	4-6pm	M-Th	Wrestling Room
Cheer	10am-12pm	M-TH	Cheer Room
ACADEC	9-11 am	MWF	9-11am ( 6/19-7/28)
Band	6-9pm	M-F	Stadium -Jun 20-23 and 26-29
Band	8am-3pm	M-F	Stadium - Aug 7-11 and 14-18
Dance	varies	M-F	Dance Room

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# Torrance Unified School District

## 2023 School Summer Camp & Activities

### Enrollment Application

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Number & Street Name City Zip Code

School Last Attended: \_\_\_\_\_ School Attending Fall 2023: \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian Email Address (Please print clearly): \_\_\_\_\_ Student ID Number: \_\_\_\_\_

If parent/guardian cannot be reached, contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy # \_\_\_\_\_ Group # \_\_\_\_\_

Please Identify Summer Activity You Wish to Enroll:	<u>Office Use</u>
<p><b>Camp: Coach: Time: Camp: Coach: Time:</b></p> <p><b>Camp: Coach: Time:</b></p> <p><b>Donation for 1<sup>st</sup> Camp selected = \$175.00 · Each additional Camp selected = \$125.00</b></p> <p><b>Last Day to Enroll or Apply for a Refund is June 30, 2023</b></p> <p><i>For financial waivers or assistance, please contact school site <a href="mailto:DruTen.Jason@tusd.org">DruTen.Jason@tusd.org</a></i></p>	<p><u>Only</u></p> <p>Total Camps Enrolled _____</p> <p>Amount \$ _____</p> <p>Receipt # _____</p> <p>Initials of Approval _____</p>

#### AUTHORIZATION TO PARTICIPATE AND RELEASE OF LIABILITY FORM

1. I certify that all information given on this application is accurate. If applicable, I have read and agree to abide by the California Interscholastic Federation (CIF) Student Athlete's Code of Ethics as well as the policies and procedures established by the Torrance Unified School District.
2. I understand that sports and athletics entail unknown and unanticipated risks, which could result in physical or emotional injury, paralysis, death, or damage to myself, to property, or to third parties. I acknowledge that such risks simply cannot be eliminated without jeopardizing the essential qualities of the activity. As a participant to this summer camp(s), I acknowledge that the risks may involve but are not limited to: being struck by another participant or ball, or all that may result in contusions, sprains, fractures, broken bones or concussions.
3. Under state law, a student must have medical and hospital insurance before participating in athletics. If the parent or guardian has sufficient coverage on their own they may state this and agree to provide proof of medical insurance with this authorization form. If a student does not have insurance coverage, policies are available for that provide accident protection. Torrance Unified School District provides liability only for any negligence on its part, which occurs during authorized practice sessions, i.e., when an authorized athletics coach is present and supervising the activity.
4. I hereby give my consent for the above-named student to attend the Summer Camp(s) and enroll in the camp(s) for which a selection has been made. I agree to ensure that the above-named student has access to a parent or guardian (i.e. home, work or cell phone) in case of emergency, class cancellation, campus evacuation, or any other

non-planned event. I agree to provide the Torrance Unified School District with valid contact information for the purpose set forth in this paragraph.

5. I understand and accept full academic and financial responsibility for selection(s) made on this application. The camp(s) are not a prerequisite for the above-named student participating in any activity offered during the regular school year. I understand that participation in any camp(s) is not a pre-tryout or try out for any Torrance Unified School Districts sports team. I understand that participation in any camp(s) does not constitute a guarantee of enrollment at Torrance Unified School Districts for permit-seeking/out of district students. There will be no grade or credit issued for participating in the camp(s).
6. I acknowledge that emergency medical information regarding the student is on file with the District and is current. If an injury or medical emergency occurs during the above-described camp(s), a supervising teacher, sponsor or chaperone has my express permission to administrator or to authorize the administration of urgent or emergency care, including the transportation of the student to an urgent care or emergency care provider. In such circumstances, notice to me and/or the Emergency Contact of the injury or medical emergency may be delayed. Therefore, any urgent or emergency care provider has my express authority to conduct diagnostic or anesthetic procedures, and/or to provide medical care or treatment (including surgery), as they may deem reasonable or necessary under all existing circumstances. All costs and expenses associated with such care are solely my responsibility. I agree to release and discharge the District/released parties, from any act or omission of negligence in rendering or failing to render any type of emergency or medical services.
7. In consideration for the District allowing the above-named student to participate in the above-described camp(s), I voluntarily agree to release, waive, discharge, and hold harmless the District, its trustees, board members, officers, schools, employees, assigns, volunteers, administrators, directors, and agents (hereinafter referred to as "released parties") from any and all claims of liability arising out of their negligence, or any other act or omission which causes the above-named student any and all losses, claims, costs, illness, injury, death, or damages of any nature in any way connected with the student's participation in above-described camp(s).
8. I understand, acknowledge and further expressly agree that this Agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
9. I am the parent or guardian of the student named above, or am the student named above and am 18 years of age or older. I acknowledge that I have read this authorization and release and understand that participation in the above-described camp(s) requires giving up substantial actual or potential rights. I have voluntarily signed this authorization and release without inducement or assurance beyond what is stated herein, and with full appreciation of the risks inherent in the above-described camp(s).
10. WITHOUT AFFECTING THE GENERALITY OF THE RELEASES, WAIVERS AND DISCHARGES SET FORTH ABOVE, THE UNDERSIGNED SPECIFICALLY RELEASES, WAIVES, AND DISCHARGES released parties, on behalf of Parent, Student, Parent's and Student's personal representatives, assigns, heirs, and next of kin, from any loss or damage, and any cost, claim, cause of action, or demand arising from or related to the Camp(s) on the account of: unsafe materials; tools; transportation; equipment; premises liability; inadequate or negligent supervision; negligence or intentional misconduct of third parties including but not limited to assault, battery or any other offense or injury to the person of Student.

By signing below, I confirm that I have read and fully understand its contents. **I am aware that this is a release of liability.**

Parent/Guardian Signature \_\_\_\_\_ Date: \_\_\_\_\_