



# Lambrick Park Secondary School

## COLLEGIATE PREP ACADEMY Application

### PERSONAL INFORMATION:

Applicants Name: \_\_\_\_\_  
Last First Middle  
Mailing Address: \_\_\_\_\_ Current Grade \_\_\_\_\_ Age: \_\_\_\_\_  
City: \_\_\_\_\_ Prov. \_\_\_\_\_ Postal Code \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender M F  
YY/MM/DD  
Current School: \_\_\_\_\_ School District: \_\_\_\_\_  
Email Address: \_\_\_\_\_

### PROGRAM COSTS:

ALL cheques payable to Lambrick Park School

**\$150 DEPOSIT CHEQUE** dated for September 1, 2020 - should be returned with this APPLICATION to LAMBRICK PARK SCHOOL OFFICE.

It is expected that students will pay **\$1500.00 a year** to participate in the COLLEGIATE PREP ACADEMY.

The fees can be made in **9 post-dated monthly payments of \$150** each due on the 1<sup>st</sup> of each month - October through June.

OR

Online at: [www.lambrickpark@sd61.bc.ca](http://www.lambrickpark@sd61.bc.ca) - ONLINE FEE PAYMENTS

Please contact LAMBRICK PARK SCHOOL OFFICE

### FIRST YEAR COLLEGE PREP PLAYERS:

Listed below is a mandatory list of first year COLLEGIATE PREP PLAYERS academy clothing.

Order forms with sizing will be sent out in June

Please return the form with a cheque for \$200.00 payable to Lambrick Park School dated July 1, 2020.

TECH ¾ sleeve shirt  
TECH T-Shirt (RED)  
TECH T-Shirt (BLACK)  
TECH T-Shirt (GREY)  
RAWLINGS shorts (BLACK)  
PUKKA Caps or PUKKA Visor  
RAWLINGS pants

\*\*\*\*\***TOTAL: \$200.00 payable to Lambrick Park School**\*\*\*\*\*

This must accompany your child with their order.

**EMERGENCY INFORMATION:**

Health Care Card #: \_\_\_\_\_ Allergies: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Doctor's Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact's Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**SPORTS INFORMATION:**

Last Team: \_\_\_\_\_

References: \_\_\_\_\_

Coaches Name: \_\_\_\_\_

Coaches Contact: \_\_\_\_\_

**Parent/Guardian Signature**

I grant my son/daughter permission to participate in the program indicated above. I certify that all statements on this application are true and complete.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's E Mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

How did you hear about the Program? \_\_\_\_\_

**Some of the advantages you will receive from your participation in COLLEGIATE PREP Baseball/Softball Academy**

- outstanding instruction in an environment that is committed to long-term athletic and academic development
- the opportunity to obtain your Dogwood Diploma while making Baseball/Softball a part of your school day
- enhanced opportunities to pursue post-secondary athletic and/or academic scholarships
- instruction in the skills of baseball/softball from the most basic to the most advanced
- instruction in fitness, nutrition, strength training, sports psychology, and sport physiology from local experts
- instruction in time management, goal setting, and leadership skill development
- the opportunity to receive officiating, coaching, first aid, and sports training certification
- the opportunity to play at the highest possible level upon graduation whether at the collegiate, elite club, or professional level.