

Warrior Field Hockey Camp 2025

May 27-29 (Tues-Thurs) from 5-7:30pm

Girls & Boys grades 1-8



To sign up, either return this form to your school (attention: Marielle Cohen, DVHS) OR sign up online at <https://forms.gle/iFpvetNuwszmbx19>

(You can use the QR code to access the online signup sheet as well!)



Dates: May 27-29 (Tues-Th)

Hours: 5-7:30pm

Cost: \$50

Location: Warrior Stadium

Open to: Those currently in grades 1-8. Both boys & girls are invited to attend!

Equipment: Sticks & shin guards will be provided for those without their own.

What to bring:

- Athletic clothing
- Sneakers/Cleats
- Mouthguard
- Water bottle

What's included:

- Camp T-shirt
- Awards at the end of the week
- Opportunity to learn from varsity level coaching staff and players!

Schedule:

Tuesday and Wednesday will be skills, Thursday will be a night of competition. Parents are invited to attend and watch on Thursday!

****Please return this form or sign up online by Monday, May 19 to guarantee a t-shirt****

Warriors Playing College Field Hockey

- Mackenzie Olsommer - Old Dominion
- Kayla Sykes - Wagner
- Ava O'Grady - Susquehanna
- Mackenzie Koger - Moravian

DV Field Hockey Coaching Staff:

- Marielle Cohen
- Cristin Cavallaro
- Paul Cavallaro
- Adalyn Ross
- Brooke Giannini
- Kelly Cooke

About the Camp:

Warrior Field Hockey Camp is a great opportunity for young players to learn the basic skills necessary to play field hockey. Athletes are broken into groups based off of their age and skill that will allow coaches to work with small groups on age- and level-appropriate skills. The camp's purpose is to teach the attendees about the sport, but also to have each athlete enjoy themselves while playing the sport we love so much!

Registration

(if you sign up online, you do NOT need to fill this out):

Cash or checks are accepted; checks can be written out to DV Friends of Field Hockey.

Name: _____ Grade: _____ Age: _____

Circle T-shirt Size: YS YM YL YXL S M L XL

Parent/Guardian name: _____

Parent/Guardian phone number: _____

Please list any allergies and any other condition that would affect the participant's ability to safely participate in camp:

I hereby authorize the directors, doctors, nurses, and physical assistants, and members of the Warrior Field Hockey Camp to examine, interview, test, and treat my child as they deem advisable, and disclose such information to other responsible officials as necessary. The Warrior Field Hockey Camp is covered by a limited insurance policy. I will be responsible for any medical charges in connection with his/her attendance at camp. I have read and agree with the rules and regulations of the Warrior Field Hockey Camp.

Name: _____

Date: _____ Relationship: _____