Maverick Softball Parent's Night Out Maverick Winter Blast

K-8 Saturday February 9 2019 from 6:00-11:00 pm



Kids Night Out will take place Saturday February 9, 2019 from 6:00-11:00pm at McCutcheon High School during the <u>Maverick Winter Blast</u>. The Maverick Booster Club will host the Maverick Winter Blast on February 9 at Judi's Catering, Lafayette. The Winter Blast is an adults only dinner, dancing, silent auction and much more. This is a fundraiser for the group that supports student athletes through scholarships, awards, equipment and more.

Drop off your kids and give yourself a parent's night off while we entertain them with games and activities throughout the night. The main goals of this night will be to provide the participants with various activities throughout the evening, give the parents the night off for the <u>Maverick Winter Blast</u>, and raise funds to pay for new equipment for our Maverick Softball program.

The kids will be placed in group activities by grade with K-2 together; 3-4 together; 5-6 together; 7-8 together. Activities will include mat ball, soccer, whiffle ball, football, basketball, cheerleading, dancing and movies. Coach Kelsey Wides and the Maverick Softball team will be facilitating the event. **The fee will be \$40 per participant (Max \$70 per family) and will include over 5 hours of supervised activities as well as a meal** (pizza, chips and soft drinks). Each camper should wear gym shoes, socks, shorts or sweats and a t-shirt. **Parents must sign children IN AND OUT.** Under childcare services this camp is tax deductible.

Kid's Night Out Registration Form due by February 7th with payment to McCutcheon Softball at McCutcheon High School, 4951 US 231 South, Lafayette, IN 47909

Name:		Grade:
School:	Email:	

Cell Contact: ______ Parent's Name: _____

PARENTAL CONSENT FORM

I, ______, do hereby give written permission for my son/daughter_______to attend the KIDS NIGHT OUT. All risks attendant to participating in the evening activities, including but not limited to bodily injury, are assumed by me as his Parent or Legal Guardian as indicated by the signature hereto. Should an emergency arise requiring an ambulance service I hereby give my permission for Kelsey Wides or her designee to contact _______ Hospital as deemed necessary by the situation. Our insurance coverage is through ______.

SIGNATURE: _____

_____DATE:____

Payment, Registration Form & Parental Consent Form are due by February 7th to Kelsey Wides at McCutcheon High School, payments can be made online at https://mhs.tsc.k12.in.us/mccutcheonathletics