

Homestead Spartan Football Camp Opportunities

Young Spartans Football Camp

- **Grades: K-4 (next year's 1-5th grades)**
- *May 31st, 2024 9-11 am at the Spartan Stadium*
- What to bring: Workout apparel, gym shoes and cleats, water bottle.
- Purpose: Introduce the game of football and teach the basics of different positions.
- Register on-line using the QR code to the right.
- Payment: \$50 - two options to pay
 - Send cash or check (**payable to Chad Zolman**) to
 - Homestead High School
 - Attn: Chad Zolman
 - 4310 Homestead Road
 - Fort Wayne, IN 46814
 - Use Venmo send to @Chad-Zolman-1



Middle School Football Camp

- **Grades: 5-7 (next year's 6-8th grades)**
- *May 20-23rd, 6-8 pm at the Spartan Stadium*
- What to bring: Workout apparel, gym shoes and cleats, water bottle.
- Purpose: Teach the basics of different positions and introduce the Spartan offensive and defensive schemes.
- Register on-line using the QR code to the right.
- Payment: \$100 - two options to pay
 - Send cash or check (**payable to Chad Zolman**) to
 - Homestead High School
 - Attn: Chad Zolman
 - 4310 Homestead Road
 - Fort Wayne, IN 46814
 - Use Venmo send to @Chad-Zolman-1



Speed, Agility and Strength Development Program

- **Grades: 4-7 (next year's 5-8th grades)**
- *Every Monday, Tuesday, and Thursday from 8-9:30 am at Homestead Stadium*
 - *The weeks of June 3-6, 10-13, 17-20, 24-27 July 8-11, 15-18, 22-25.*
- What to bring: Workout apparel, gym shoes and cleats, water bottle.
- Purpose: Develop technique, skills, and muscle memory to improve athleticism.
- Register on-line using the QR code to the right.
- Payment: \$100 - (two options to pay) \$5 per session – pay as you go.
 - Send cash or check for \$100 (**payable to Speed, Agility and Strength, LLC**) to
 - Homestead High School
 - Attn: Chad Zolman
 - 4310 Homestead Road
 - Fort Wayne, IN 46814



Camp Purpose

This clinic is for all players who have completed 2nd grade through 8th grade. It will be an opportunity to work with Homestead coaches and players to improve your softball skills in all facets of the game. The four-day camp will focus on skill development and learning the way the game is taught in the Homestead Softball program. Each player will learn the way the Lady Spartans teach hitting, defense, pitching, and base running.

Contact Us

Email Coach Clagg with any questions about the upcoming camp

Email: claggtom@gmail.com

Address: 7210 Pine Lake Road
Fort Wayne, IN 46814

Phone: 260-402-1261

2024 Homestead Softball Skills Camp

JUNE 3rd – JUNE 6th

9:30 am – 12:00 noon

Homestead Varsity Field & Practice Turf

Cost: \$40 (includes camp & shirt)



How to Register

1. Fill out the registration form and medical release form below.
2. Make a check payable to “Tom Clagg” for the \$40 fee (that covers four days of camp and a softball t-shirt)
3. Send/deliver your check and registration form to:

Tom Clagg
7210 Pine Lake Road
Fort Wayne, IN 46814

Any questions about registration please email Coach Clagg at
claggtom@gmail.com

Please submit registration form by May 31st

What to Bring:

1. Softball equipment (bats, gloves, cleats, gym shoes, catcher’s equipment – if you have it, etc.) – shirt will be provided on day one
2. A good attitude, a willingness to learn, and a competitive spirit

Where to Meet:

- We will meet on the varsity softball diamond and will start promptly at 9:30am each day and end at noon each day

Registration

Name: _____

Parents Names: _____

Address: _____

Phone (Cell): _____

Emergency Phone: _____

Email: _____

Grade (completed): _____

Medical Release

I, the undersigned guardian/parent of the registered player, hereby release the S.W. Allen County School District, its employees and agents, and all coaches, assistants and aides associated with the Softball Skill Camp, from any and all liability for any claims I may have arising out of any injury to any participant during said camp. I understand that the activities conducted during the camp could result in serious injury. The participant is in good health and able to participate in activities except as noted below.

Parent/Guardian Signature Date

Known health concerns or limitations

Camp Purpose

This camp is for all incoming 7th grade to 9th graders in the Southwest Allen County School system. It will be an opportunity to work with Homestead Baseball coaches and players to improve your baseball skills in all facets of the game. The two-day camp will focus on skill development and learning the way the game is taught in the Homestead Baseball program. Each player will learn the way the Spartans teach hitting, defense, pitching, and base running.

Contact Us

Email Coach Byall with any questions about the upcoming camp

Email: nbyall@sacs.k12.in.us

Address: 4310 Homestead Road
Fort Wayne, IN 46814

Twitter: @HomesteadBSB

Phone: 260-431-2206

Web: <https://homesteadathletics.com/>



2024 Homestead Baseball Skills Camp



JUNE 4TH & JUNE 6TH

1pm - 4pm

Homestead Varsity & JV Fields

Cost: \$50 (includes camp t-shirt)

How to Register

1. Fill out the registration form and medical waiver form on this page (either digitally or on paper)
2. Make a check payable to Homestead Baseball for the \$50 fee (that covers two days of camp and a Homestead baseball camp shirt)
3. Send/deliver your check and registration form to:
Homestead High School
Attn: Nick Byall – Homestead Baseball
4310 Homestead Road
Fort Wayne, Indiana 46814

*Any questions about registration, please email Coach Byall

Please submit registration form by May 20th

What to Bring:

1. Baseball equipment (bats, gloves, baseball pants, cleats, gym shoes, catcher's equipment – if you have it, etc.) – hat and shirt will be provided on day one
2. A good attitude, a willingness to learn, and a competitive spirit

Where to Meet:

- We will meet on the varsity baseball diamond and will start promptly at 1pm each day and end at 4pm each day

Registration

Name: _____

Parents Names: _____

Address: _____

Phone (Cell): _____

Phone (Home): _____

Email: _____

Grade (Fall 2024 – Circle One): 7th 8th 9th

T-shirt size (Adult sizes): _____

Middle School (circle one): Woodside Summit

Medical Waiver

I, the guardian/parent of _____ understand that the game of baseball is a dangerous game and the risk of injury is always present. I give my child permission to attend and participate in this camp. I understand that the camp staff, Homestead High School, and Southwest Allen County Schools are not liable for injuries, damages, and expenses sustained during the camp.

Name

Signature

Date

HOMESTEAD ELEMENTARY VOLLEYBALL CAMP

(GRADES 3-5 AS OF FALL 2024)



To Register Online, Visit Homestead's Volleyball Page at [Homestead Volleyball Registration](#) or visit the Homestead Athletics Website

JUNE 18-20

3-5PM

REGISTRATION \$45

Each camper will receive a t-shirt, water bottle, and camp photo!

DAY 1: PLATFORMS

DAY 2: SETTING, DEFENSE

DAY 3: ATTACKING

COME PREPARED WITH
COMFORTABLE CLOTHES AND
GYM SHOES



HOMESTEAD BOY'S VOLLEYBALL CAMP

(GRADES INCOMING 5-8)



JUNE 25-27
3PM-5PM

REGISTRATION: \$45

OUR SCHEDULE FOR THE
CAMP:

DAY 1: PASSING AND
SERVING

DAY 2: SETTING AND
ATTACKING

DAY 3: PUTTING IT ALL
TOGETHER

To Register Online: Go to Homestead High School's Volleyball
Team Page or click on the following LINK:
[MIDDLE SCHOOL CAMP REGISTRATION](#)



HOMESTEAD

BOYS' BASKETBALL SUMMER LEAGUE

Name _____ Address _____

Zip _____ Phone _____ School _____ Email Address _____

Height _____ Weight _____ **GRADE 24-25 School Year** _____

Grade Level **2024-2025 School year:** Division 1: (Grades 1, 2)
Division 2: (Grades 3, 4)
Division 3: (Grades 5, 6, 7)
Division 4: (Grades 8, 9)

Emergency Phone Number _____ Ask for _____

T-Shirt Size: **Adult Sizes:** Small _____ Medium _____ Large _____ Extra Large _____
Youth Sizes: Small _____ Medium _____ Large _____

Waiver: I hereby state that I am physically able to participate in the sport of basketball. I waive any rights I may have against Chris Johnson, Southwest Allen County Schools, and all camp staff for any injuries incurred while participating in this camp.

Athlete Signature: _____ Date: _____

Parent Signature: _____ Date: _____

***Please note the dates and times have changed from previous years.**

League Notes:

1. **Entry Fee:** \$60 entry fee. This includes a team T-shirt that must be worn as a uniform for all games.
2. **Checks:** Checks should be made out to Chris Johnson. Mail to: Homestead High School; Attention: Chris Johnson: 4310 Homestead Road, Ft. Wayne, IN 46814. Please call Chris Johnson at (260) 241-4803 with any questions.
3. **Playing Time:** Each player will play an equal amount of playing time. The league will have two 20-minute halves. Stop and go time will be kept for the last one minute in the second half.
4. **Entry forms:** The league will be filled on a first come basis. **The first 40 players in each division will be accepted.** League fee is non-refundable after May 10th.
5. **Team Assignments and Schedule:** Team assignments, schedule and rules will be emailed to the parents prior to the first game. Shirts will be passed out on the day of their first game.
6. **Divisions:** The league will be divided into four divisions. **Division 1** will be made up of incoming **(2024-2025 school year)** (Grades 1, 2); **Division 2** (Grades 3, 4); **Division 3** (Grades 5, 6, 7); **Division 4** (Grades 8, 9). Each team will have 8-10 players.
7. **League Days:** June 3, 5, 6, 10, 12, 13, 17, 18
8. **Game Times:** 12:45, 1:35, and 2:25 (Only if needed) (Depends on the number of teams in the league)
Note: You will only play one game per day.
9. **Location:** All games will be held at Homestead High School. Please enter through Door 1.
10. **Fun:** The goal of the league is to provide supervised competitive play with an emphasis on learning, sportsmanship, and having fun.

HOMESTEAD BOYS' BASKETBALL 7th, 8th, AND 9th GRADE BASKETBALL CAMP

PURPOSE

To teach the fundamentals of basketball.

WHO CAN PARTICIPATE

Any student who will be entering the 7th, 8th, or 9th grade for the **2024-2025** school year.

WHEN

June 3-6 (4 days)

TIME: 11:15-12:30

LOCATION

Homestead High School (Enter Door 1)

COST

\$55.00—Make checks payable to Chris Johnson. **Mail to:** Homestead High School
Attention: Chris Johnson; 4310 Homestead Road, Fort Wayne, IN 46814

INSTRUCTORS

Chris Johnson, Head Basketball Coach at Homestead High School, and Assistant Coaches.

REGISTRATION FORM

NAME _____ GRADE **(2024-2025)** _____

ADDRESS _____

PHONE # _____ Email Address _____

SHIRT SIZE (All sizes are adult) _____ Small _____ Medium _____ Large _____ X-large

Waiver: I hereby state that I am physically able to participate in the sport of basketball. I waive any rights I may have against Chris Johnson, Southwest Allen County Schools, and all camp staff for any injuries incurred while participating in this camp.

Athlete Signature: _____ Date _____

Parent Signature: _____ Date _____

HOMESTEAD BOYS' BASKETBALL Kindergarten-6th Grade SUMMER CAMP

PURPOSE

To teach the fundamentals of basketball
A big emphasis will be placed on hustling and having fun!

WHO CAN PARTICIPATE

Any student in grades Kindergarten through 6th grade (2024-2025) school year.

WHEN

June 3-6 (4 days)

TIME AND LOCATION

Session 1: Grades (K, 1, 2, 3) (2024-2025) 8:30-9:30 at Homestead High School.

Session 2: Grades (4, 5, 6) (2024-2025) 9:45-11:00 at Homestead High School.

Enter at Door 1

COST

\$55.00—Make checks payable to Chris Johnson.
Mail to: Homestead High School; Attention: Chris Johnson
4310 Homestead Road, Fort Wayne, IN 46814

INSTRUCTORS

Chris Johnson, Head Basketball Coach at Homestead High School, and Assistant Coaches.



REGISTRATION FORM

NAME _____ GRADE (2024-2025) _____

ADDRESS _____

PHONE # _____ Email Address _____

SHIRT SIZE (Check One) Youth _____ Small _____ Medium _____ Large _____
 Adult _____ Small _____ Medium _____ Large _____

Waiver: I hereby state that I am physically able to participate in the sport of basketball.
I waive any rights I may have against Chris Johnson, Southwest Allen County Schools,
and all camp staff for any injuries incurred while participating in this camp.

Athlete Signature: _____ Date _____

Parent Signature: _____ Date _____