



Check List for SD State Mini Camp

Sioux Falls, SD

June 29th - July 1st, 2010

| Personal | ODP Items | Miscellaneous | | | | | | | | | | | | | | | | | | | | |
|---|--|---------------|------|-----|--------------|-----|--------------|-----|--------|-----|-------|-----|--------------|-----|-------|-----|-------------|-----|-----|-----|-----------|--|
| <ul style="list-style-type: none"> <input type="checkbox"/> Shampoo <input type="checkbox"/> Conditioner <input type="checkbox"/> Body wash/soap <input type="checkbox"/> Deodorant <input type="checkbox"/> Face Wash/pads <input type="checkbox"/> Acne treatment <input type="checkbox"/> Toothbrush <input type="checkbox"/> Toothpaste <input type="checkbox"/> Floss <input type="checkbox"/> Mouthwash <input type="checkbox"/> Contacts/glasses <input type="checkbox"/> Contact solution/case <input type="checkbox"/> Powder <input type="checkbox"/> Razor/Shaving kit <input type="checkbox"/> _____ <p style="text-align: center;">NO NAME = NO STUFF!</p> | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; border-bottom: 1px solid black;">QTY</th> <th style="text-align: center; border-bottom: 1px solid black;">ITEM</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">___</td> <td>White Shirts</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Black Shirts</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Shorts</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Socks</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Warm up suit</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Shoes</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Shin Guards</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Bag</td> </tr> <tr> <td style="text-align: center;">___</td> <td>Back Pack</td> </tr> </tbody> </table> <p style="text-align: center;">LABEL EVERYTHING</p> | QTY | ITEM | ___ | White Shirts | ___ | Black Shirts | ___ | Shorts | ___ | Socks | ___ | Warm up suit | ___ | Shoes | ___ | Shin Guards | ___ | Bag | ___ | Back Pack | <ul style="list-style-type: none"> <input type="checkbox"/> Shirts <input type="checkbox"/> Shorts <input type="checkbox"/> Underwear <input type="checkbox"/> Sleepwear <input type="checkbox"/> Alarm Clock <input type="checkbox"/> Bath towel/washcloth <input type="checkbox"/> Sunscreen <input type="checkbox"/> Mosquito Spray <input type="checkbox"/> Prescription medications <input type="checkbox"/> Cell phone & charger <input type="checkbox"/> Small amount of spending money <input type="checkbox"/> Water bottle/container <input type="checkbox"/> Pillow <input type="checkbox"/> _____ <p style="text-align: center;">Put your name on every item you bring – including your socks! We don't want miscellaneous gear and you don't want to buy more equipment!</p> |
| QTY | ITEM | | | | | | | | | | | | | | | | | | | | | |
| ___ | White Shirts | | | | | | | | | | | | | | | | | | | | | |
| ___ | Black Shirts | | | | | | | | | | | | | | | | | | | | | |
| ___ | Shorts | | | | | | | | | | | | | | | | | | | | | |
| ___ | Socks | | | | | | | | | | | | | | | | | | | | | |
| ___ | Warm up suit | | | | | | | | | | | | | | | | | | | | | |
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| ___ | Shin Guards | | | | | | | | | | | | | | | | | | | | | |
| ___ | Bag | | | | | | | | | | | | | | | | | | | | | |
| ___ | Back Pack | | | | | | | | | | | | | | | | | | | | | |

DO NOT BRING A SOCCER BALL!