

SOUTH SPENCER FOOTBALL CAMP



DATES: June 20-21

TIME: 9am-Noon

COST: \$25

2nd kid \$10- 3rd kid \$10- 4th-Free

South Spencer Football Staff will conduct a summer football camp for players entering 1st grade through 8th grade. The dates of the camp will be June 20-21 from 9:00 am to 12:00 noon.

The camp will provide training in the basic fundamental skills of football, with emphasis on the individual techniques designed to develop better overall players. Football camp participants will be divided into groups according to age. The last day of the camp, players will participate in 7 vs. 7 games to work on skills in modified game situations. Camp will include Camp Awards in Punt, Kick, Pass competition as well as team competitions. Camp will also have motivational speakers. We are also putting together a kicking and punting period for kids interested in improving kicking skills

South Spencer Football Camp Registration Form

To be completed by parent or guardian. Type or Print. Fill in all sections.

Child's Name _____

Home Address City, State ZIP _____

Home Phone _____ Cell Phone _____

E-Mail Address _____

Name of School _____

Grade entering Fall 2019 1 2 3 4 5 6 7 8

Father Name _____ Mother Name _____

Emergency Contact Phone Numbers (during Camp hours)

1. Name: _____ Phone Number: _____

Cell Number: _____ Relationship to Camper: _____

2. Name: _____ Phone Number: _____

Cell Number: _____ Relationship to Camper: _____

T-shirt Size: Circle size YM YL AS AM AL XL XXL

Please make checks out to:
South Spencer High School Football

Mail Registration Forms to:

South Spencer High School
1142 N. Orchard Road
Rockport, IN 47635

*Walk ups are accepted, please come between 8:30-8:50 the first day so we can organize campers into groups

Waiver of Liability and Authorization for Medical Treatment

I hereby request that you accept this application for the South Spencer Football Camp and allow my child _____ to participate in the Camp during the dates of June 27-28. Although there will be no contact, there still can be a risk of injury. I hereby release South Spencer School Corp. and the entire football staff from liability of cost or damages if an injury shall occur while participating in the camp. I have instructed to my child _____ to obey and respect the property of South Spencer High School and the South Spencer Football coaching staff. In the event of possible injury, I give permission for trainer to give treatment and to my child _____. I agree to be responsible for primary cost associated with medical care provided to child.

Do you have Primary Insurance? Yes _____ No _____

Ins. Number _____

All campers will have a water break after each 10 minute drill. If a camper needs water during any drill they may do so. Please instruct your children they may get drinks when needed. I have read and agree to the terms of this release and Authorization for Medical Treatment.

Print Name: _____

Signature: _____ Date: _____