

Fee: \$150

Payment due at our MANDATORY Contract Night Small Gym, April 28th (6 - 8 PM)

PLEASE MAKE CHECKS PAYABLE TO: FHC SPARTAN FOOTBALL CAMP DATES - JULY 29TH - AUGUST 2ND (6 - 8 PM)

2019 CAMP REGISTRATION

Last N	ame:		First Name:	Grade:		
Emerg	ency #:		Conta			
Parent	ť s Email:					
Shirt S	bize:					
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Camp Release and Consent

I, the parent or guardian of the child above, do release the Francis Howell School District, its employees, and camp staff of all liability for medical expenses incurred while participating in the 2019 Spartan Football Camps. I am aware of my child's health and believe my child to be physically able to participate in normal football related activities. If, in the case my child is injured during the camps and I cannot be reached, I give the Spartan Football Camp Staff permission to seek appropriate medical attention as they see fit.

Signature of parent/guardian

Date

* No Refunds will be given after the start of camp on July 29th, 2019 * QUESTIONS: Email Coach Eberhardt at coacheberhardt@gmail.com