Warren Parks and Recreation's

"BELIEVE TO ACHIEVE"

FREE YOUTH FOOTBALL CAMP

ACTIVITY # 21215

FOR: Boys and Girls, ages 8 and up

LOCATION: Warren Community Center
5460 Arden, S. of 14 Mile and W. of Mound

DAY/TIME: **Camp A.** Friday, July 10, 6-9 p.m.
Saturday, July 11, 10 a.m.-1 p.m.
Camp B. Friday, July 17, 6-9 p.m.
Saturday, July 18, 10 a.m.-1 p.m.

PLEASE ARRIVE AT 5:30 P.M. ON FIRST DAY OF CAMP FOR REGISTRATION.

HOST: Pat Cavanaugh, 3 yr. starter, 2 yr. captain at Saginaw Valley St. University & former College Football Coach.
CAMP STAFF: Former Division 1 - 3 College Football Players

ALL REGISTERED CAMPERS WILL RECEIVE A FREE T-SHIRT. PARTICIPANTS MAY REGISTER FOR ONE CAMP ONLY!

REGISTRATION FORMS AVAILABLE ONLINE AT FREEYOUTHFOOTBALLCAMP.COM. REGISTRATION DEADLINE FOR BOTH CAMPS IS JULY 7.
MAIL REGISTRATION FORM TO WCC: 5460 ARDEN, WARREN, MI 48092 FAX TO: 586-268-8409
FOR MORE INFORMATION, CALL 586-268-8400 OR EMAIL FREEYOUTHFOOTBALLCAMP@YAHOO.COM.

FREE YOUTH FOOTBALL CAMP (ACTIVITY #21215 A AND B)

NAME _____ M or F PHONE _____

ADDRESS _____ CITY _____ ZIP _____

AGE _____ DATE OF BIRTH _____

SHIRT SIZE (Adult) S M L XL SCHOOL ATTENDED _____

I, _____ have read the rules and regulations governing this activity and hereby promise that I will abide by and follow all the restrictions in a sportsman like manner as a member of (2009 camp)

WHICH CAMP WOULD YOU LIKE TO ATTEND (circle)? A. July 10 and 11 B. July 17 and 18

PLAYER'S SIGNATURE _____ DATE _____

My son/daughter _____ has my permission to engage in the City Recreation Football Camp and is physically able to participate in the sport. I also agree to abide by the rules and regulations of the program and the rules of good sportsmanship and fair play on and off the field. I assume all risk of injury incurred or suffered. I hereby voluntarily release and agree not to sue the City of Warren or its employees and hold harmless the City of Warren and it's employees from all liability for all types of damages or injuries, whether foreseeable or not, sustained by myself, my child and other family members while participating, watching and traveling to and from this activity.

_____ _____ _____
Parent or Guardian Signature Date Phone