

# 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 9, 6 - 9 p.m.  
Saturday, July 10, 10 a.m. - 1 p.m.  
**Camp B.** Friday, July 16, 6 - 9 p.m.  
Saturday, July 17, 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](http://FREEYOUTHFOOTBALLCAMP.COM). REGISTRATION DEADLINE 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](mailto: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 \_\_\_\_\_ PARENT E-MAIL ADDRESS \_\_\_\_\_

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 (2010 camp)

WHICH CAMP WOULD YOU LIKE TO ATTEND (circle)? A. July 9 and 10 B. July 16 and 17

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 \_\_\_\_\_