

# 2018 Granville Youth Tackle Football Camp

When: July 23<sup>rd</sup> – 26<sup>th</sup> Time: 6:00–8:00 PM

Players Name: \_\_\_\_\_

School: \_\_\_\_\_

Players Age: \_\_\_\_\_ Grade (2018/19): \_\_\_\_\_

Address: \_\_\_\_\_

Parent or Guardian: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

In case of Emergency Call: \_\_\_\_\_

Heart Conditions? \_\_\_\_\_ Allergies? \_\_\_\_\_

Medical Conditions? \_\_\_\_\_

Cost: **\$50.00**

Where: Granville High School

Camp Director: Coach John Irion

Granville Varsity Head Coach

Web site: [www.eteamz.com/granvillehorde](http://www.eteamz.com/granvillehorde)

Camp Focus: This is a SKILLS CAMP

Equipment: Helmets only

**\*\*\*GET THE EQUIPMENT FROM YOUR COACH\*\*\***

**Policies:** Rain Days: If 4 days of camp are completed and 1 day is rained out; there will be no makeup days. If more than 1 day is rained out we will try to make the time up. Arrangements will be made to maximize instruction time. Disruptive campers will be sent home without a refund.

Make checks payable to: Granville Youth Football

**Mail check & completed forms to:**

**Granville Youth Football**

**c/o Greg Scribner**

**269 Hicks Road**

**Granville, NY 12832**

I, as parent or guardian, give the child named above permission to attend & participate in the **YOUTH CAMP**. I verify that the child listed above is physically able to participate in the contact and non-contact activities at the camp. I also understand that the Granville Youth Football and its coaches will not be held responsible for injury to person or property. I have carefully read the above and agree to all terms.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## Signup Today!!!!