

## Medical Treatment and Waiver of Liability Release

List any medical conditions that camp personnel should be aware of (please use additional pages as necessary):

\_\_\_\_\_

List any medication currently taken:

\_\_\_\_\_

List any allergies:

\_\_\_\_\_

Contact information in case of emergency:

<b>Daytime Phone</b>	
Name:	
Night time phone:	
Name:	
Medical Ins. Company:	
Phone:	

I hereby give my permission for SJHS sports medicine staff athletic trainers to provide any needed medical treatment for my son/daughter while he/she is attending the sports camp. I specifically give my permission for necessary and emergency care to be give to \_\_\_\_\_ (name of camper) by Lakeland Hospital and other medical treatment to providers. I attest that my son/daughter has had a physical within the last 12 months and that the physical disclosed no medical conditions other than those listed above, that would make participation in this sports camp a risk.

I hereby acknowledge that participation in this sports camp and related activities is at the sole discretion and judgment of the parent or guardian and involves an inherent risk of physical injury. I, on behalf of my son/daughter, hereby assume all such risk. I hereby release and agree to hold harmless SJHS, its Board of Trustees, students and employees, from all claims, actions, damages, and liabilities for personal injury or damage relating to or arising out of any sports camp activity except where the injury or damage is caused by the gross negligence of the high school's employees. SJHS is not responsible for lost or stolen items.

Signature of parent or legal guardian:

St. Joseph High School  
Athletic Department  
2521 Stadium Drive  
St. Joseph, MI 49085

# St. Joseph Kids Football Camp

## 2014



St. Joseph High School  
2521 Stadium Drive  
St. Joseph, MI 49085  
(269) 926-3200



# Football Camp

This one day program is for those football players who are entering the 1st through 6<sup>th</sup> grade. The day's session will be devoted to developing actual performance skills.

When: **Saturday July 26, 2014**  
**8:30 am until 11:30 am**  
 Cost: **\$20.00**  
 Location: **Dickinson Stadium**

**Bring: Football cleats**

Please check football website for updates:  
[www.stjoefootball.com](http://www.stjoefootball.com)

## Camp Schedule

Saturday	
8:30 am	Registration
8:50 am	Meet with Coach Church
9:00 am	Practice
11:30 am	Secure

There are 2 segments that make up practice time:  
**OFFENSE and DEFENSE**

## RETURN THIS APPLICATION WITH YOUR PAYMENT

NAME		
ADDRESS		
CITY	STATE	ZIP
NAME OF SCHOOL ATTENDING FALL 2013		
SCHOOL CITY		
GRADE FALL 2014		

POSITION (PLEASE SELECT TWO):	
<input type="checkbox"/> QUARTERBACK	<input type="checkbox"/> DEFENSIVE LINE
<input type="checkbox"/> LINEBACKER	<input type="checkbox"/> OUTSIDE LINEBACKER
<input type="checkbox"/> TIGHT END	<input type="checkbox"/> OFFENSIVE LINE
<input type="checkbox"/> WIDE RECEIVER	
<input type="checkbox"/> DEFENSIVE BACK (INCLUDING SAFETY)	
<input type="checkbox"/> RUNNING BACK (INCLUDING FULLBACK)	

**PLEASE ENROLL ME IN THE ST. JOSEPH KIDS FOOTBALL CAMP PROGRAM, SCHEDULED FOR:**

**JULY 26, 2014**

**ENCLOSE A CHECK FOR \$20 MADE PAYABLE TO:**

**ST. JOSEPH FOOTBALL**

## MAIL FORM TO:

**ST. JOSEPH HIGH SCHOOL**  
**ATTN: COACH GANDALF CHURCH**  
**2521 STADIUM DRIVE**  
**ST. JOSEPH, MI 49085**

## Contact Us:

**VARSITY COACH:**  
**Gandalf Church**  
**E-mail:**  
**GChurch@sjschools.org**

**(269) 449-6553**  
**Fax: (269) 926-3223**

**Visit us on the web:**  
**www.stjoefootball.com**