


2017 GREYPUP FOOTBALL CAMP

<p>SESSION DATES Thursday June 22 and Friday June 23</p> <p>SESSION TIMES 5:30 to 8:00 pm</p> <p>SESSION COST Registration: \$30.00</p> <p>LOCATION Camp will be held on the Statesville High School Practice Football Field</p>	<p>CAMP PURPOSE Participants will learn the basic fundamentals of each position and they will enhance their athletic ability.</p> 	<p>GRADE LEVEL Rising 3rd Graders through rising 8th graders</p> <p>CAMP COACHES SHS Staff and Senior players</p> <p>CAMP DIRECTOR Randall Gusler rgusler@iss.k12.nc.us</p>
--	--	--

IMPORTANT REGISTRATION INFORMATION

- Make Checks Payable to SHS Booster
- Please write in the Memo: Youth Football Camp
- **Return Form and Payment** to Statesville High School by **June 19, 2017**
- **Checks can be mailed** to the school (Statesville HS, 474 N. Center Street, Statesville, NC 28677) with **attn: Randall Gusler**
- Walk in registrations will be accepted up to the start of camp

Participants Name _____

Grade Entering August 2017 _____ Age _____

Parent/Guardian Names : _____

Address: _____

City: _____ State: _____ Zip Code _____

Home phone # _____ Emergency cell # : _____

Parents Cell # _____

Position: Offense _____ Defense _____

T- SHIRT SIZE

____ Youth Small

____ Youth Med.

____ Youth Large

____ Adult Small

____ Adult Med.

____ Adult Large

____ Adult X-Large

Medical Release: My child has permission to attend the 2017 Greypup Football Camp. I understand injury and illness to my child could result from or during participation of the camp. I understand camp staff will not be held responsible for such injuries. In case of such accident, I give permission for my child to be given medical treatment as deemed appropriate.

Parent/Guardian Signature : _____ Emergency # _____ Date _____