

Northern Cass Jaguars

2019 Area Youth Summer Football Camp Grades 6-8

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For: All boys and girls going into grades 6 - 8

Site: Northern Cass High School, Practice Football Field

---Note (In case of rain we will be inside, meet in Commons and have camp in a gym)****

Time /Dates: Wednesday June 5th - Thursday June 6th, 2019 --- 8:30am - 11:30am

- Camp will provide skilled coaching staff (mixture of Varsity athletes, Junior High coaches, and Varsity coaches)
- Individualized & small group instruction for all aspects of football (kicking, catching, running and throwing) will also dive into position specific focus
- Team passing scrimmages, Punt/Pass/and Kick Competition
- Athletes will be given snacks, water, and Gatorade daily as well as a Camp T-Shirt

Registration:

Cost: **\$50.00 per student or \$80.00 per family** (Checks payable to Northern Cass Football)

Deadline for Registration: **Monday, May 13th**

(Turn - in registration and fees to student's classroom teacher or High School office)

What to bring: T -shirt / shorts or sweatpants / socks / cleats or athletic shoes / water bottle

****Water and Gatorade will be provided for all athletes, but it will save time, and having to use hundreds of plastic cups, if the students bring their own water bottle.

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Return this section with payment and registration to child's teacher, High School office, or mail to :

Trent Kosel
Northern Cass School
16021 18TH St. SE
Hunter, ND 58048

Please make checks payable to Northern Cass Football

For more Info: contact Trent Kosel (trent.kosel@northerncassschool.com)

Please Print:

Student's Name: _____ Grade: _____ Age: _____ Teacher: _____

Parent/Guardian: _____ Day Phone: _____ Cell: _____

Fee: \$50 per student or \$80 per family check# _____ cash _____

Tee Shirt Size: YS YM YL AS AM AL AXL AXXL

Offensive Position: QB RB WR OL Defensive Position: DL LB DB

Release of Liability:

Date: __/__/__

I hereby request that you accept the enrollment of _____ in the Junior Jaguars Football clinic/camp.

I hereby release Northern Cass High School and all their staff from any and all claims on account of any injuries which may be sustained by my son/daughter while attending this camp, and any claims which hereafter may be presented by my son/daughter as a result of any such injuries.

I also certify that he/she is medically fit to participate in this activity. **Each participant is responsible for his/her own insurance.**

Parent Name: (Print) _____ Parent Signature: _____