

## DETAILS

The camp will be at Columbia City High School on July 10,11,12 at 6 PM – 7 PM. Check-In will be at 5:45 PM Tuesday July 10th. Please be at camp at least 10 minutes early each day.

## SCHEDULE

Active Warm-Up  
Basic Football Skills (Blocking, Tackling, Throwing, Catching)  
Position Drills  
Competitive Drills

## WHAT TO BRING

Each athlete must wear football shoes or tennis shoes, shorts, T-shirt. Each player will receive a camp T-shirt. Please indicate size on registration form. PLEASE BRING A PAIR OF TENNIS SHOES IN CASE OF RAIN.

## PURPOSE

The Purpose of the Camp is to expose young people to the great game of football. By learning the basic fundamentals at each position, participants will be able to play the game at a higher level and have fun playing this great game.

## TUITION

The cost is \$50 per camper. There is a \$10 deduction for each additional child a family enrolls. The fee includes a camp T-Shirt and instruction by high school staff and players. Please make checks payable to Columbia City Football. WILL ACCEPT WALK-UP REGISTRATION

**Please make all checks payable to:**

**Columbia City Football Camps**

**Submit to the CCHS Main Office or Send form and check to:**

**Brett Fox  
Columbia City High School  
600 N. Whitley Street  
Columbia City, IN 46725**

**foxbn@wccsonline.com**



## Please Put Next Year's Grade

Name\_\_\_\_\_

Address\_\_\_\_\_

City\_\_\_\_\_

State\_\_\_\_\_ Zip\_\_\_\_\_

Grade\_\_\_\_\_ Height\_\_\_\_\_ Weight\_\_\_\_\_

Date of Birth\_\_\_\_\_

Phone #\_\_\_\_\_ Work #\_\_\_\_\_

(T-Shirt Size ( YM, YL, S, M, L, XL, XXL)\_\_\_\_\_

Person to contact in Case of Emergency

\_\_\_\_\_

(Name of camper) \_\_\_\_\_

has permission to participate in the Columbia City Skills Camp. I also hereby waive and release the camp from any and all liabilities arising from injuries incurred while at the camp. I also accept the financial responsibility for any medical charges that may be rendered for needed medical treatment.

Parent's Signature/Date

\_\_\_\_\_

Insurance Carrier\_\_\_\_\_

Policy #\_\_\_\_\_

## REGISTRATION FORM