

Willits Football Camp 2010



Camper's Name _____
Address _____
City _____ Zip _____
Phone/Cell _____
Parents Name(s) _____
Email address _____
School/Grade _____

<u>Session/Camp</u>	<u>Grade</u>	<u>Time</u>	<u>Date</u>	<u>Cost</u>
Willits 2010	2-12	9-3pm	7/17-7/18	\$50

Camp will be held at Willits High School.

The \$50 fee includes camp instruction and 2010 football camp T-shirt. Please include size with your payment.

No refund will be allowed for cancellations occurring less than one week prior to the start of camp, unless the cancellation is due to a medical condition documented by a physician's letter. Campers who leave camp within the first two days due to injury or illness will receive a pro-rated credit that can be applied to future camps. No other refunds or credits will be allowed.

Siblings receive \$ 25 off each tuition. Registrations on the first day of camp will begin at 8:00 AM. Space is limited. Incoming WYF football players should call Coach Verdote (707-367-2603) For details. No confirmation letters will be sent. Your cancelled check is your receipt/or receipt for cash will be issued.

Payment \$ _____ (check one) Checks Cash

Send application and fee to: Willits Youth Football Association
PO Box 1535
Willits, CA 95490



Medical Insurance

Parents must complete the form below before their child is permitted to participate. An athletic trainer will be at the camp and medical facilities are nearby.

My child has permission to attend the 2010 Willits Football Camp. I will be responsible for any medical or other charges in connection with his/her attendance at the camp.

Parent Signature _____

Parent Name _____

Camper's Name _____

Insurance Co. _____

Policy Number _____

By submitting this application, I hereby authorize the staff of the Willits Football Camp to act for me according to their best judgment in any emergency requiring medical attention. I, the parent/legal guardian of the above named camper, hereby acknowledge that participation in this camp, as in any sport, may result in accident and/ or injuries. Even though there are risks involved, I still give my approval for the above named camper to participate in any and all camp activities. I expressly assume all risks and hazards incidental to such participation, and I do hereby waive, release, absolve, indemnify, and agree to hold harmless the Willits Youth Football Assoc. its staff, suppliers, sponsors, participants, Willits High school, for any claim arising out of injury or illness to the said camper, regardless of the cause. Willits Youth Football Assoc. also does media releases and publications about its camps and my child's picture maybe used in publications unless a written form is submitted otherwise stating it may not be used. By participating in this camp I grant permission for the media release/pictures of my child.

