

NORTHERN STATE UNIVERSITY

YOUTH FOOTBALL CAMP

TUESDAY MAY 21st & WEDNESDAY MAY 22nd



WHO
WHAT
WHEN
WHERE

PLAYERS ENTERING GRADES 3-7, FALL 2019
NON-PADDED YOUTH FOOTBALL CAMP
TUESDAY MAY 21st & WEDNESDAY MAY 22nd 2019
NORTHERN STATE UNIVERSITY FOOTBALL PRACTICE FIELD

(PARK IN THE BARNETT CENTER PARKING LOT)

COST

\$40 (WALK-UP \$50) INCLUDES: INSTRUCTION and T-SHIRT

WHAT TO BRING: FOOTBALL CLEATS OR TENNIS SHOES, WATER BOTTLE AND WEATHER APPROPRIATE CLOTHING

TUESDAY & WEDNESDAY
MAY 21 & 22, 2019

SEND FORM & PAYMENT TO:

NSU FOOTBALL CAMP
#1129
1200 S. JAY ST.
ABERDEEN, SD 57401
CHECKS PAYABLE TO:
NSU FOOTBALL CAMP

MORE INFO - CONTACT:

JOHN ROY
OFFENSIVE LINE
JONATHAN.ROY@NORTHERN.EDU
605-228-6608

5:00-6:00 pm **CHECK IN @ NSU PRACTICE FIELD**

(PARK IN THE BARNETT CENTER PARKING LOT)

6:00-7:00 pm INDIVIDUAL INSTRUCTION

7:00-8:00 pm COMPETITIONS & GAMES



@NSUFOOTBALL



MAKE YOURS™

Camper's Name _____ School _____ Grade 2019-20 _____

Address _____ City/State/Zip _____

Parent or Guardian _____ Camper's Cell Phone _____ Parent's Cell Phone _____

Age _____ Height _____ Weight _____ E-mail Address _____

Youth Sizes: T-Shirt Size (circle one): S M L / Adult Sizes: S M L XL All transactions are final.

In case of emergency, contact _____ Emergency contact phone # _____

Medical Insurance Co. _____ Policy # _____

Group # _____

Physician name _____ Phone _____ Hospital preference: _____

Medical conditions the youth program staff and medical emergency services personnel need to be made aware of: _____

I wish to register my minor child named above and consent to my child's participation in the summer sports camps and leagues sponsored by the Department of Intercollegiate Athletics at Northern State University during the summer of 2019. I recognize that participation in recreational and instructional activities, even when well supervised and managed, poses a risk of physical injury to my child, and I agree to assume such a risk on behalf of my child. I understand that children registered for NSU Athletics summer sports camps and/or leagues will receive instruction in the basic principles of the sport of their choice and will spend a significant amount of time practicing and performing sporting techniques and/or researching and performing a variety of enrichment techniques under the supervision of experienced instructors, and I consent to my child's participation in this program. I consent to the transporting of my child in University vehicles to and from various locations on campus and in the Aberdeen area for recreational and instructional activities. I consent to the use of video recordings and photographs of my child's participation in NSU Athletics summer sports camps and league programs. I certify that my child has no medical condition or impairment, including the use of medication, which might inhibit his participation.

RELEASE OF LIABILITY

I, the undersigned, hereby hold the Regents of Northern State University harmless from liability for any and all medical and/or accident expenses which my minor child may incur during his/her involvement in the summer sports camps and/or leagues at the Department of Intercollegiate Athletics, Northern State University. I hereby certify that my child is provided coverage via personal health and accident insurance in affect which is sufficient to cover any and all of the expenses, noted above which might occur.

Parent/Guardian Signature _____

Print Parent/Guardian Name _____