



2010 LA JOLLA COUNTRY DAY CONTACT FOOTBALL CAMP

JULY 26 - 30, 2010
4:00-6:00 PM

Individual Skill, Position Group and Team Instruction

Campers will be grouped by Pop Warner teams, divisions and/or weight and tackle football experience

Ages: Jr. Midget and Midget Division Pop Warner Football Players
or Boys Ages 10-15 Years Old

Equipment: All Campers Must Provide Their Own Helmet, Mouth Guard, Pads, Practice Jersey and Pants

Cost: \$20 per Camper, Please Make Checks Payable to LJCD

Registration

Please complete and mail with check for \$20 made out to LJCD to:

Attention: Coach Hutzler
La Jolla Country Day School
9490 Genesee Ave.
La Jolla, CA 92037

Camper Name: _____ **Pop Warner Team:** _____
Camper Grade in School (fall of 2010): _____ **Age:** _____ **Weight:** _____ **Yrs. Playing Football:** _____
Camper Address: _____
City: _____ **Zip:** _____
Parent Name: _____
Home #: _____ **Cell #:** _____
Parent Email: _____

T-Shirt Size (Circle One):

Youth S M L XL Adult S M L XL

Waiver

Must be completed and signed for participation

I _____, as parent or legal guardian of _____, a minor (herein after Minor"), hereby grant the permission necessary to allow the Minor to participate in the above noted event. I acknowledge and agree, on my own behalf and on behalf of the Minor, that such participation subjects the Minor to the possibility of physical illness or injury (minimal and/or serious) and that I, on my own behalf and on behalf of the Minor, acknowledge that the Minor is assuming the risk of such illness or injury by participating in the above noted event. In the event of such illness or injury, I authorize LJCD, the coach, school staff, or parent chaperone to obtain necessary medical treatment for the Minor and hereby, on my own behalf and on behalf of the Minor, release and hold harmless LJCD, the coach, school staff, parent chaperone, or the Hosting Site, on whose premises the event will occur, (hereinafter collectively "Releases") in the exercise of this authority. I further acknowledge and understand that I will be responsible for any and all Medical and related bills that may be incurred on behalf of the Minor for any illness or injury that the Minor may sustain during the above noted event and while traveling to and from the site for the above noted event whether or not the event actually occurs. I, on my own behalf and on behalf of the Minor, hereby warrant that I have read this Release and Waiver in its entirety and fully understand its contents. I, on my own behalf and on behalf of the Minor, am aware that this Release and Waiver releases LJCD from liability and contains an acknowledgement of my voluntary and knowing assumption of the risk of injury or illness. I, on my own behalf and on behalf of the Minor, further acknowledge that nothing in this Release and Waiver constitutes that the above noted event will occur. I, on my own behalf and on behalf of the Minor, have signed this document voluntarily and of my own free will.

Parent Name (Print)

Parent Signature

Date

Questions: Coach Jeff Hutzler 858.518.1905 or JHutzler@LJCDS.org