



# **GOLDEN EAGLES FOOTBALL**

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# **YOUTH CAMP 2023**

## **General Information:**

- **When?** July 17th - 20th @ Mercer County High School
- **For Who?** Our camp is open to incoming 3rd - 8th Graders
- **What You Get:** This camp will provide an opportunity to learn from current MCHS football players and staff the fundamentals of the game. Participants will have the opportunity to learn appropriate stance for their position, position specific techniques, basic fundamentals, and more! As a High School Football Coaching Staff, we are dedicated and understand the importance of developing our young athletes. It is important for our next generation of football players to begin developing the basic fundamentals of the game early. This camp will be high energy, competitive and FUN for both beginners and experienced players.

## **Equipment needed**

- T-shirt, Shorts, Football Cleats or Athletic Shoes



## **Camp Dates & Times:**

**Monday, July 17th - 9:00AM - 10:30AM**

**Tuesday, July 18th - 9:00AM - 10:30AM**

**Wednesday, July 19th - 9:00AM - 10:30AM**

**Thursday, July 20th - 6:00PM @ Public  
Pool Camp Cookout**



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# YOUTH CAMP 2023

## **Registration Form - \$20 Cost / Camper:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

AGE: \_\_\_\_\_

CURRENT GRADE: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_

CELL PHONE: \_\_\_\_\_

T-SHIRT SIZE (MEN'S): S M L XL XXL XXXL

AMOUNT ENCLOSED \$ \_\_\_\_\_

*(Please make checks payable to MC Football - Filled out form & exact payment can be mailed to the HS or presented on first day of camp)*

## **Authorization For Medical Treatment**

In case of a medical emergency or accidental injury concerning my child, I hereby authorize the camp officials of the Mercer County Youth Football Camp to perform or obtain for the benefit of my child any emergency medical care they deem necessary. In my absence I further authorize the camp officials to consent to any necessary x-ray examination, anesthetic, medical or surgical diagnosis of treatment, and/or hospital care concerning my child

\_\_\_\_\_  
*Parent/Guardian (Signature Required)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Relationship*

## **Release of all Claims:**

In consideration of the acceptance of my registration form and the permission granted my child to enter the premises and participate in the Mercer County Golden Eagles Youth Football Camp. I do hereby, for myself and my child, our heirs and assigns, forever waive, release, remise, and discharge the owners, operators, and sponsors of said premises, said camp activities, any vehicle and equipment used therein, and their respective servants, agents, officers and officials, and other participants in said camp activities, of, from and against all claims, demands, actions, causes of actions of any sort and any and all liability or injuries sustained by my child and/or his or her property arising out of or connected in any way with my child's participation in said camp activities, even though such liabilities or injuries may arise out of negligence or carelessness on the part of persons or entities mentioned above. I understand that participants in said camp may sustain serious accidental injuries and / or property damage. I know the inherent risks involved in the game of football. I agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable for damages. I agree that this waiver, release and assumption of risk is to be binding on my heirs and assigns forever.

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*Parent/Guardian (Signature Required)*