

Parent Release, Medical Treatment
Authorization And Health Statement

CAMPER'S NAME _____

PARENT OR GUARDIAN NAME (PLEASE PRINT) _____

RELATION TO CAMPER _____

ADDRESS (IF DIFFERENT THAN CAMPER) _____

PHONE: Day _____ Eve _____

MEDICAL INSURANCE CO. _____

POLICY NO. _____

Please list any medical conditions or allergies that the camper might have of which the medical authorities should be aware in order to administer medical treatment:

EMERGENCY CONTACT NAME _____

EMERGENCY CONTACT PHONE # _____

I hereby authorize and give my consent to the Health Authorities of Willamette University and directors of the Bearcat Football Camp, the Athletic Training Staff or any licensed physician to perform upon or administer to

NAME OF PARTICIPANT (PRINT) _____

any reasonably necessary medical or surgical treatment and to act for me according to their best judgment in any emergency requiring medical attention. In the event of indicated major surgery, the University authorities or physicians are not hereby excused from attempting to contact me by phone, or mail, before relying upon this authorization. I hereby waive, hold harmless and release Willamette University Bearcat Football Camp. My signature also certifies that my son has obtained proper medical care for any current medical condition. I will be responsible for any medical or other charges in connection with his attendance at camp. This permission is good only while the participant is attending the Bearcat Football Camp and only until the participant has attained his eighteenth birthday.

DATE _____

SIGNATURE OF PARENT OR GUARDIAN _____

TUITION

Youth CAMPER.....\$85
Includes instruction, daily snack and t-shirt.

\$40.00 deposit is required by July 5, 2007 and is **non-refundable** after that time.

Full payment is due at camp registration.

**We will accept walk-up registration on the first day of camp with an additional \$5 fee.

Make Checks Payable To:
BEARCAT FOOTBALL CAMP

Mail Payment To:
**BEARCAT YOUTH FOOTBALL CAMP
WILLAMETTE UNIVERSITY
900 STATE STREET
SALEM, OR 97301**

FOR MORE INFORMATION CALL
JOSH SCOTT AT (503) 510-7041

Sponsored by:



2007

**WILLAMETTE UNIVERSITY
YOUTH FOOTBALL CAMP
Presented By:**

American Family Insurance



*July 9 - July 12 2007
WILLAMETTE UNIVERSITY
SALEM, OREGON*

*FEATURING THE WILLAMETTE UNIVERSITY
FOOTBALL STAFF AND PLAYERS
(Grades 2 - 8)
DAY CAMP*

Proud Sponsor of Willamette Youth Football Scholarship

CAMP OBJECTIVE

This camp is designed to emphasize improvement of fundamentals and techniques related to each camper's position and skill level. Campers will be coached in offensive, defensive and special teams skills as well as speed and agility techniques.

We strive to give our younger campers a solid well-rounded curriculum that allows opportunities for participation with a variety of positions and skills.

Particular attention is given toward increasing the self-esteem and psychological development of each camper. Our goal is for each camper to have a safe and positive experience. We stress individual attention, improving skill level, and having an enjoyable week!

Campers are under university policies while attending the camp. **Failure to follow these policies may result in dismissal from camp by the staff.**

DAILY SCHEDULE

8:30-8:45	Motivational Talk
8:45-9:00	Warm-Up
9:00-10:00	Offensive Skills
10:00-10:45	Defensive Skills
10:45-11:00	Snack
11:00-11:45	Special Teams Practice
11:45-12:30	Games
12:30	Parent Pick Up

Autograph Day

On Wednesday July 11, 2007 current and former NFL players along with Willamette University Players will be on hand to sign autographs and take photographs.

ARRIVAL AND DEPARTURE

Final registration will be Monday, July 9th in McCulloch Stadium, located inside Bush Park at 8:00 a.m. Orientation for all campers and parents will be held from 8:00-8:30 a.m.

Campers can be dropped off at McCulloch Stadium in Bush Park at 8:00 a.m. and picked up after 12:30 p.m.

Camp will conclude after the game session on Thursday, July 12th at 12:30 p.m.

EQUIPMENT

Willamette University Youth Football Camp is a non-contact camp so no football equipment is necessary. Campers should bring **socks, t-shirts, gym shorts and cleats**. Willamette University has a synthetic playing surface which allows campers to participate in tennis shoes. However, we recommend all campers bring a pair of cleats.

MEDICAL INFORMATION

Campers must have their own medical insurance to attend this camp. Please fill out the enclosed medical information form completely. Certified athletic trainers are in attendance at every practice and will attend to all injuries. **You must have a completed medical card on file before you will be allowed to attend camp.**



**Bearcat Football
League Champions 1995, 1996, 1997, 1999
National Playoffs 1996, 1997, 1999, 2004**

APPLICATION INFORMATION

CAMPER'S NAME _____ SHIRT SIZE _____ DATE OF BIRTH ___/___/___
ADDRESS _____ CITY _____ STATE _____ ZIP _____
DAYTIME PHONE _____ HOME PHONE _____
SCHOOL _____ GRADE ENTERING FALL '07 _____
HEIGHT _____ WEIGHT _____ OFF. POSITION _____ DEF. POSITION _____

THE PARENT RELEASE, MEDICAL TREATMENT AUTHORIZATION AND HEALTH STATEMENT MUST BE COMPLETED AND ON FILE BEFORE A CAMPER WILL BE ALLOWED TO PARTICIPATE.

Bearcat Youth Football Camp
Willamette University
900 State St.
Salem, OR 97301

INSURANCE COMPANY _____
INSURANCE POLICY # _____