



**SPRING LIONS FOOTBALL CAMP**

**INCOMING 9<sup>TH</sup> GRADERS**

**MONDAY JULY 26<sup>TH</sup> – THURSDAY JULY 29<sup>TH</sup>**

**8:00 – 10:30**

**\$25.00**

**SITE – SPRING HIGH SCHOOL / LEONARD GEORGE STADIUM**

**FEATURES – A COMPREHENSIVE FOOTBALL CAMP TO TEACH THE FUNDAMENTALS OF THE SPRING HIGH SCHOOL FOOTBALL PROGRAM; THIS CAMP ALLOWS EACH ATHLETE TO WORK CLOSELY WITH THE VARSITY COACHING STAFF.**

**DRESS APPROPRIATLY. PLEASE WEAR SHORTS, T-SHIRT, AND FOOTBALL CLEATS.**

**PLEASE MAKE SURE ATHLETES ARE PRESENT 15 MINUTES EARLY EACH DAY OF CAMP.**

**CASH OR MONEY ORDER PAYABLE TO: SPRING ISD**

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**REGISTRATION**

**\*PLEASE BRING COMPLETED REGISTRATION FORM AND CASH/MONEY ORDER ON THE FIRST DAY OF CAMP (JULY 26<sup>TH</sup>).**

**NAME** \_\_\_\_\_ **DOB** \_\_\_\_\_

**GRADE** \_\_\_\_\_ **HOME PHONE** \_\_\_\_\_

**PARENT CONTACT INFORMATION**

**PARENT'S NAME** \_\_\_\_\_

**CONTACT PHONE NUMBER** \_\_\_\_\_

**I HEREBY GIVE MY PERMISSION FOR MY CHILD TO PARTICIPATE. I DO UNDERSTAND THAT ASSUMPTION OF RISK IS INVOLVED IN THE PARTICIPATION OF THESE PROGRAMS. IN CASE OF AN EMERGENCY AND THE PARENTS CANNOT BE REACHED, I GIVE THE SPRING HIGH SCHOOL STAFF PERMISSION ACCORDINGLY TO USE THEIR BEST JUDGEMENT IN EMERGENCY.**

**PARENT SIGNATURE** \_\_\_\_\_