

The 2021

Sparta Youth Football Camp



- **Mission** The camp is open to everyone entering grades 3-9 in the fall. It is a non-contact camp aimed at improving offensive, defensive and special team skills necessary for the game of football. The Sparta HS coaching staff along with former and current HS players will instruct campers. Campers take part skills, drills, team building activities and games that make the four days informative and a great experience for all involved.
- **When** June 28-July 1 from 9:00-1:00 (Monday-Thursday)
- **Where** Sparta HS game field and practice field
- **Cost** 175.00 (prior to June 1) 185.00 (after June 1) 275.00 for 2 or more
- **Equipment** Shorts, T-shirt, cleats or sneakers, sunscreen and a positive attitude
- **Lunch** Campers are to bring lunch each day. Pizza is provided for the campers on Thursday
- **Camp Store** Drinks and snacks are sold at the camp store. Parents can bank money under the camper's name so you do not have to worry about lost money.
- **Trainer** The camp has a Certified Athletic Trainer on site
- **Contact** For more information contact Frank Marchiano at frank.marchiano@sparta.org

Complete form and send check made payable to Frank Marchiano

Frank Marchiano
21 Meadow Ridge Lane
Lafayette, NJ 07848

Sparta Youth Football Camp Registration Form (Please Print)

Name: _____

Grade fall 2021: _____

Home Phone: _____

Cell Phone: _____

Parent Email: _____

Emergency contact name: _____

Emergency contact number: _____

Allergies (Y/N): Explain: _____

Medications: (Y/N): Explain: _____

Shirt Size: Please circle one: **Youth L Adult S Adult M Adult L Adult XL**

Liability Release and Assumption of Risk Disclaimer

In consideration of the Sparta Youth Football Camp allowing my child or ward to participate in its football camp, I understand that my son must have current and active medical insurance before he can attend camp. I hereby register my son for the Sparta Youth Football Camp and authorize the staff to direct him in participation in camp activities. My son has no medical or emotional problems, which may affect his ability to safely participate in your program. In the event of injury, I authorize the Sparta Youth Football camp and its athletic training staff to obtain and/or administer any medical care or treatment deemed necessary. I understand that there are inherent risks associated with sports activity and that neither I, nor my son, will hold the Sparta Youth Football Camp Administrators, Coaches or Counselors liable for any injuries sustained at the camp. Additionally, I give my permission to utilize any video or photos that may include my child or myself for any commercial use that the Sparta Youth Football Camp chooses to utilize to promote the football camp. By signing this, I verify that I have read and accepted all administrative policies stated above.

Signature of Legal Guardian: _____ **Date:** _____