

Youth Camp

Speed and Agility

July 10-12, 7-9p

Registration Options
Mail or drop off to
Allen Feigel
8900 Newburgh Rd
Livonia, MI 48150

23/24 K-8th Graders COED \$60.00 (cash or check)

**T-Shirts are only guaranteed to pre-registered campers prior to June 15th.
Make checks payable to Churchill High School - No Refunds.**

Camper's First Name:

Camper's Last Name:

Camper's Shirt Size (Please circle):

Youth Sizes: S M L XL

Adult Sizes: S M L XL 2X

Camper's 23-24 Grade: K 1 2 3 4 5 6 7 8

Parent Name:

Parent Phone:

Parent Email:

Liability Agreement

I hereby and herein authorize the Director of the Churchill Football Camp, or any staff working on the camps behalf, to act in my stead for the purpose of acquiring emergency medical attention for my child or ward. I impose upon the assumptions of this duty the responsibility to act with reasonable care and caution and release and waive all liability for any injuries and illness incurred while at the camp, in the event the same is performed pursuant to such standard. By my signature hereunder, I warrant that my child or ward is in good physical condition, has no undisclosed medical problems, illnesses or disabilities, and is capable of full and active participation in the football camp. I also represent that my child or ward has received a physical within the last year and is medically competent to participate in the activities at the camp. Lastly, by my signature here under, I have read and fully understand the above liability agreement.

Signature of Parent or Guardian: _____