

Authorization for Emergency Medical Treatment

In case of a medical emergency or accidental injury concerning my child, I hereby authorize the camp officials of **Cienega Bobcats 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 or 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 **Cienega Bobcat 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 anyway 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.

Parent or Guardian Signature (Required)

Date

Relationship

Send registration form
and check payable to:

BOBCAT FOOTBALL
c/o Pat Nugent
12775 E Mary Ann Cleveland
Vail, AZ 85641

Directions:

Take I-10 East to Vail, take 279 exit and take a left, heading north on Colossal Cave Road. Make a Left on Mary Ann Cleveland. Cienega is on the right hand side of the street.

For additional Information contact:

Pat Nugent
520-879-1841
nugentp@vailschooldistrict.org

Cienega

Bobcats

Football Camp

at

Cienega High School

June 24 - 27, 2019

5:30pm-7:30pm



Bobcat Football Camp

PURPOSE

The Bobcat Football Academies are designed for players that will be freshmen in high school or younger (ages 5-14). Campers will be grouped by their positions. The camp will provide the instruction necessary for improvement though fundamental drills, hard work, and game situations. Campers will be given the opportunity to learn:

- Throwing and catching
- Appropriate stance for their position
- Offensive and defensive techniques
- Quick starts out of a stance
- Basic fundamentals to each position
- Stretching and speed enhancement

This is an intensive 4-day camp designed for those who wish to learn and improve their fundamental in the game of football. This camp will be held on June 24-27 at Cienega High School from 5:30pm-7:30pm.

Cienega Football has become a state power with 14 playoff appearances and 10 region championships. The Bobcats advanced to the state semi finals in 2017 with a 12-1 record.

Camp Site:

Cienega High School
12775 E Mary Ann Cleveland Way

Vail, AZ 85641

Date:

June 24 – 27, 2019

Cost :

\$60 – Pre-registration
\$70 – Registration at the door
(payable to BOBCAT FOOTBALL)

Eligibility:

Any football player to be a freshman or younger.

What to bring:

Camper should wear football shoes, shorts, and a t-shirt.

Sign-in and registration will be between 4:30 pm and 5:30 pm on the first day of the camp. For pre-registration, mail the registration form and check payable to:

BOBCAT FOOTBALL

Cienega High School
12775 E Mary Ann Cleveland Way
Vail, AZ 85641

**Due by: Friday, June 21, 2019

REGISTRATION FORM

Name _____

Address _____

City _____

State/Zip _____

Phone _____ Age _____

Grade _____ School _____
(Fall 2018)

Parent's Name _____

Cell # _____ Home# _____

Youth Team _____

Adult T-shirt Size: S M L XL XXL XXXL

Youth T-shirt Size: S M L

Please check all that apply

\$60 Pre-registration

\$ 70 Registration at the door

\$ _____ Amount enclosed

**REVERSE SIDE OF REGISTRATION FORM
MUST BE COMPLETED AND SIGNED.**