



CASTLE FOOTBALL

2017 Middle School Team Camp



Castle Middle School Team Camp



June 5th | 7th | 12th | 14th | 19th | 21st | 26th | 28th

8:00-10:00 AM (\$80)

Middle School Team Camp is for all 7th and 8th grade Castle Football players. Players will work with middle school and varsity coaches. The basics of the Castle offense and defense will be installed during the camp.

Registration Options (Select One)

- 1) Visit www.castlefootball.com and register online (paperless option)
- 2) Complete the form below and return to Coach Payne at Castle North or Coach Lawrence at Castle South
- 3) Register the 1st day of camp

What to Bring?

All campers should bring football cleats & tennis shoes.
Helmets & Shoulder Pads will be distributed at camp by the middle school coaching staff.

Weather

In the event of adverse weather all camp activities will be moved inside to the Castle Indoor Facilities.

Location of Camp, Drop-off, and Pickup

All camps will take place on the Football Practice Fields located between the Softball Field and the Castle South Football Field. Parents are invited to watch Camp, but must remain off the practice fields.
Player drop-off and pickup should take place in the Softball parking lot.

Refunds

All money will be refunded for medical purposes only.

Prorated Camp Fees

If a camper is not able to attend all scheduled days of camp, the camp fee may be prorated. Contact castlefootballcamp@gmail.com for more information.

castlefootball.com

Registration Form

Player(s)	School (Fall 2017)	Grade (Fall 2017)	Shirt Size
1			Youth: S M L Adult: S M L XL XXL
2			Youth: S M L Adult: S M L XL XXL
3			Youth: S M L Adult: S M L XL XXL

Camp Information	Price	Players Attending	Total
Castle Middle School Team Camp (7 th -8 th) June 5 th 7 th 12 th 14 th 19 th 21 st 26 th 28 th 8:00-10:00 AM (\$80)	\$80.00	X _____	
TOTAL			

Contact Information

Parents/Guardians: _____

Email: _____

Phone: _____

Release Information

Condition of enrollment: I hereby authorize the staff of Castle Football Camp to act for me according to their best judgment in the event of any emergency requiring medical attention for my child. I waive and release the Castle Football Camp staff for any and all liability for any injuries and illness incurred while at Castle Football Camp. I have no knowledge of any physical impairment that would be affected by the above camper's participation in the camp.

X _____

PARENT/GUARDIAN SIGNATURE

DATE

Detach & Return this form with payment

Questions:
castlefootballcamp@gmail.com

Make checks payable to Castle Football Camps

Camp registration is open through the first day of each camp

Castle Football Camps
Attn: Geoff Bennett
3344 Highway 261
Newburgh, IN 47630