

@ Union Grove High School

July 25 – July 28

Grades 2 –9

**Application Form
2011**

Golden Touch Football Camp

Session 1: 6th – 9th Grade (2011-12)
Session 2: 2nd - 5th Graders (2011-12)

Name_____

Address_____

City_____

State_____ Zip_____

School_____

Email _____

Home Phone_____

Height_____ Weight_____

Grade in 10 -11_____

**Make Check out to Golden Touch
Basketball Academy**

_____ \$60.00 paid in full

Shirt Size (circle)
XXL XL L M S
YS YM YL

Physical Waiver Form



6th-9th Graders
8:30-11:00 AM _____

2nd-5th Graders
11:30 – 1:30 PM _____



Check in at Red Shed:
20 minutes
Warm-up/Footwork

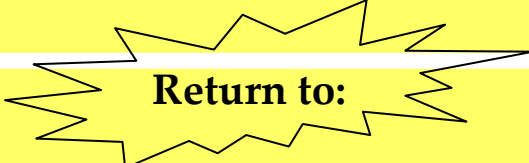
20 minutes
Contests
(Punt, Pass, Obstacle Course)

70 minutes (varies by level)
Drill/Skill

40 minutes
7 on 7



Camp this year will be held at Union Grove High School. The cost of attending the four-day session is \$60. To register for camp, complete the Application Form and the Physical Waiver Form. Print clearly, and fill in all the blanks. You may also register online at our website listed below.



David T. Pettit
8400 Queensbury Ln.
Sturtevant WI 53177

For questions visit our website at goldentouchacademy.com or contact me at coach@goldentouchacademy.com

You could also call 262-633-0838

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____ Age _____

Email _____

The parents or guardians signing this form acknowledge the risks of injury inherent in football, including, but not limited to injuries to the head, brain, spinal cord, cardiovascular systems, bones, joints, and soft tissues, arising out of rigorous contact or non-contact athletic activity. In consideration of the reasonable fees charged for putting on the Golden Touch Football Camp, the undersigned parents or guardians, on behalf of themselves and their minor child who enrolls in the camp, hereby exculpate from liability, release and waive all claims for personal injury against David T. Pettit, Golden Touch Basketball Academy, Union Grove School, and all Assistant Coaches, arising out of negligent supervision, control, coaching, training, instruction, unsafe premises, and all other responsibilities necessary to run the camp.

My child is covered by (insurance company, policy number) _____

Are there any restrictions on your son's participation?
Yes _____ No _____ (If yes, please attach a note explaining.)

Parent's/Guardian's signature: _____ Date _____