



# SCOTCH PLAINS- FANWOOD PAL

## 2011 FOOTBALL CAMP

SCOTCH PLAINS/FANWOOD HIGH SCHOOL  
JUNE 27- JUNE 30<sup>TH</sup>, 2011 - 9:00AM-12: 30PM



THE CAMP FEATURES THE **SPF HIGH SCHOOL COACHING STAFF**

AND **PAL YOUTH COACHES.**

- \* THE CAMP IS OPEN TO FOR AGES K – 8<sup>TH</sup>
- \* THE CAMP TAKES PLACE RAIN OR SHINE
- \* ALL CAMPERS WILL BE GROUPED ACCORDING TO AGE



**REQUIRED ITEMS:**

- \* TEE SHIRT
- \* SHORTS
- \* SOCKS
- \* CLEATS OR SNEAKERS
- \* ALSO SUGGESTED- BASEBALL CAP AND SUNSCREEN

**FEE: \$125.00**

NAME: \_\_\_\_\_ AGE: \_\_\_\_ DOB: \_\_\_\_\_

GRADE IN SEPTEMBER 2010: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL NUMBERS: \_\_\_\_\_

MEDICAL INSURANCE CARRIER: \_\_\_\_\_ POLICY# \_\_\_\_\_

**SHIRT SIZE: (YL) (AS) (AM) (AL) (XL) (XXL)**



CHECKS PAYABLE TO: **SPF FOOTBALL CAMP**

I do hereby give my child (ward) permission to participate in all activities in the SPF PAL Football Camp. I do hereby waive, release and discharge Scotch Plains Fanwood High School and SPF PAL Football Staff of any rights to claim damages resulting in an injury to persons or property that may be sustained or suffered by my child in connection with or participation in or arising out his/her traveling to and from the Scotch Plains Fanwood Football Camp. I agree to the above waiver and join herein

AMOUNT RECEIVED: \_\_\_\_\_ CHECK: \_\_\_\_\_ CASH: \_\_\_\_\_



PARENT/ GUARDIAN NAME \_\_\_\_\_

PARENT SIGNATURE: \_\_\_\_\_

**\* ALL APPLICATIONS ARE TO BE RETURNED TO SCOTCH PLAINS POLICE DEPARTMENT PAL MAILBOX LOCATED IN LOBBY BY JUNE 24**

**“COPS FOR KIDS”**