

# ELEMENTARY

## SPRING FOOTBALL CAMP



### 1<sup>ST</sup> – 6<sup>TH</sup> GRADE



<b>DATES:</b>	<b>TUESDAY</b> MAY 23 MAY 30	<b>WEDNESDAY</b> MAY 24 MAY 31	<b>THURSDAY</b> MAY 25 JUNE 1
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<b>TIME:</b> 5:30pm – 6:30pm	<b>LOCATION:</b> CLOVIS NORTH FOOTBALL FIELDS
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<b>\$30 PRE-REGISTRATION BEFORE MAY 23RD</b>	<b>\$40 ON OR AFTER MAY 23<sup>RD</sup></b>
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MAKE CHECKS PAYABLE TO: CLOVIS NORTH QUARTERBACK CLUB.  
 DROP OFF MONEY AT CLOVIS NORTH ATHLETIC OFFICE FOR PRE-REGISTRATION OR  
 MAIL TO 2770 E. INTERNATIONAL AVE., FRESNO, CA 93730. NO REFUNDS.

FOR MORE INFORMATION CONTACT COACH PIERCE AT 559-304-1017 OR EMAIL HIM AT [williampierce@cusd.com](mailto:williampierce@cusd.com).

**PLAYER NAME:**

<b>PLAYER EMAIL:</b>	<b>PARENT EMAIL:</b>
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<b>CURRENT GRADE:</b>	<b>CURRENT SCHOOL:</b>
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**AS THE PARENT/GUARDIAN OF:**

PLEASE PRINT PLAYERS NAME HERE

I HERE BY GIVE MY APPROVAL FOR HIS/HER PARTICIPATION IN THE ELEMENTARY SPRING FOOTBALL CAMP. I ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO THE CONDUCT OF THE ACTIVITES AFOREMENTIONED, AND TRANSPORTATION TO AND FROM SAID ACTIVITY. I DO FURTHER RELEASE, ABSOLVE, INDEMNIFY AND HOLD HARMLESS CLOVIS NORTH FOOTBALL, ITS ORGANIZERS, SPONSORS AND ITS LEADERS, ANY OR ALL OF THEM. IN CASE OF INJURY TO MY CHILD, I HEREBY WAIVE ALL CLAIMS AGAINST ITS ORGANIZERS, SPONSORS AND ANY OF ITS LEADERS APPOINTED TO THEM. IT IS FURTHER UNDERSTOOD THAT CLOVIS NORTH FOOTBALL WILL NOT PROVIDE INSURANCE.

<b>PARENT/GUARDIAN SIGNATURE</b>	<b>DATE</b>
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**PERSON TO CONTACT IN CASE OF EMERGENCY:**

<b>NAME</b>	<b>PHONE NUMBER</b>
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In accordance with CIF bylaw 207, any athlete who transfers from School "A" to School "B" after having prior contact, during the previous 24 months, either directly or indirectly with school "B" prior to enrollment shall not be eligible at School "B" for 365 days from initial date of enrollment. This includes this camp, clinic, AAU, club team, and/or workouts.

