



C O N T A C T
I N F O R M A T I O N

Riley's Football Camp of Champions

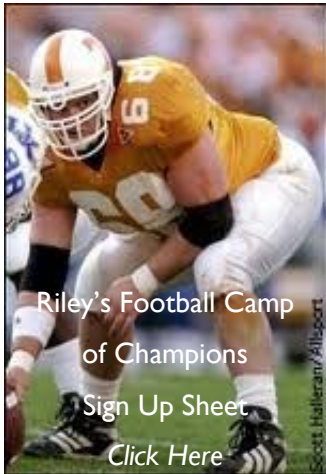
226 Vista View Court

Dandridge, TN 37725

Phone: 865-405-6700

Email:

rileysfootballcamp@yahoo.com



Riley's Football Camp
of Champions

Sign Up Sheet

[Click Here](#)



Directions to Field of Dreams

Address

1110 Treadway Drive

Dandridge, TN 37725

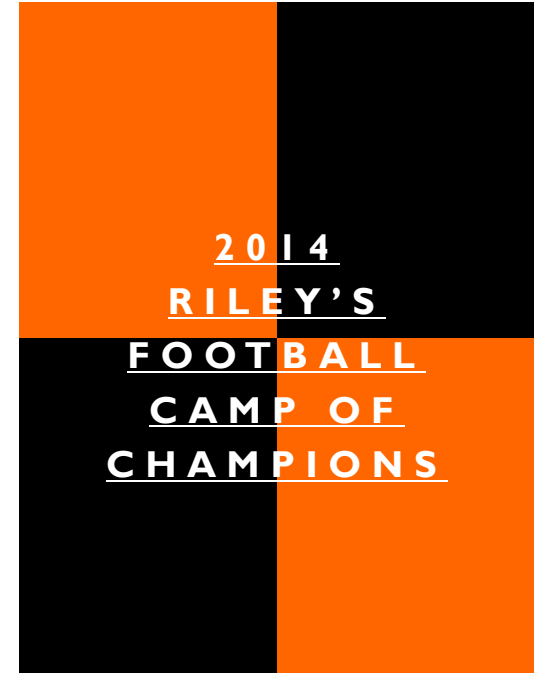
I-40 WEST EXIT 415
RIGHT ONTO US-25W/US-70/TN
TOWARD DANDRIDGE GO 2.3 MILES
TURN RIGHT AT FIELD OF DREAMS SIGN
ONTO TREADWAY DR.
FOOTBALL FIELD IS ON RIGHT AT BOTTOM OF HILL.

I-40 EAST EXIT 415
MERGE RIGHT ONTO US-25W/US-70/TN
TOWARD DANDRIDGE GO 2.3 MILES
TURN RIGHT AT FIELD OF DREAMS SIGN
ONTO TREADWAY DR.
FOOTBALL FIELD IS ON RIGHT AT BOTTOM OF HILL.

8 6 5 - 4 0 5 - 6 7 0 0

*"If winning isn't everything,
why do they keep score?"*

-Vince Lombardi



**July 14th, 15th, 17th
6:00pm-8:00pm
Field of Dreams in Dandridge, TN
Open to participants born
between 8/2/02 thru 8/1/06**



8 6 5 - 4 0 5 - 6 7 0 0





CAMP INFORMATION

Age: Born 8/2/02 thru 8/1/06

Check In: Monday July 14th, 5:00 pm at Field of Dreams in Dandridge

Camp Dates: July 14th, 15th, 17th

Time: 6:00pm-8:00pm

Cost: \$25 per camper or family with 2 campers will be \$40. Make checks payable to Spencer Riley.

What to bring: Campers needs to bring football cleats and wear cool, comfortable clothing, sports drinks if needed All other equipment will be provided. This is a non-contact camp. **DO NOT BRING**

FOOTBALL HELMET OR PADS

CAMPERS CAN NOT PARTICIPATE UNTIL REGISTRATION PROCESS HAS BEEN THOROUGHLY COMPLETED.

CAMP OBJECTIVES

CAMP WILL BE AN EXHILERATING EXPERIENCE FOR ALL YOUTH. WE WILL CONCENTRATE ON TEACHING THE CORRECT FUNDAMENTALS OF THE GAME OF FOOTBALL. DURING THE 3 DAYS YOUR CHILD WILL BE EXPOSED TO THE FUNDAMENTAL SKILLS, DRILLS AND REPTITIONS REQUIRED TO PLAY CHAMPIONSHIP FOOTBALL. YOUR CHILD WILL ALSO LEARN ABOUT TRAINING AND CONDITIONING TECHNIQUES INVOLVED IN THE GAME OF FOOTBALL.

SIGN UP NOW AND LEARN TO PLAY LIKE A CHAMPION!!

REGISTRATION

NAME: _____ AGE _____

ADDRESS: _____

CITY: _____ STATE: _____

EMERGENCY CONTACT

NAME: _____

RELATIONSHIP

NUMBER: _____

ALLERGIES: _____

MEDICATIONS: _____

I certify that my child is physically fit to participate in the 2014 Riley's Football Camp of Champions. I am aware of the inherent risks of participating in this physical activity, and I further state that the city of Dandridge, TN, any member of the staff of the 2014 Riley's Football Camp of Champions and the Field of Dreams facility will not be held liable for accident or injury, including preexisting illnesses or injuries as a direct or indirect result of participation in camp activities. I give permission for camp officials to seek medical assistance as deemed necessary.

Parent Signature/Guardian

Print Parent Name/Guardian

Phone:

Mail Registration and documents to the address below. Registration is also accepted Day 1 of camp.

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