

Riverside Beavers Youth Football Camp

Grades 1 - 6

June 10-13 – 12:30 - 2:30 pm

Riverside Stadium (The Big House)

Come for Basketball camp in the morning and stay for Football Camp in the afternoon

Wear a t-shirt, shorts, and athletic shoes or football cleats.

Bring a water jug and a light snack

Led by Coach Bors & his staff, the primary purpose of the camp is to give athletes entering 1st through 6th grade an opportunity to learn basic football fundamentals and philosophies while also having a good time and a great experience. Athletes will learn both offensive and defensive fundamentals and philosophies by position. Riverside High School players will also assist with the camp and be on-hand to interact with the campers. This is a non-contact camp.

Each camp attendee will receive a camp t-shirt as well as pizza and a drink on the last day. Please call Coach Ishmael at 440-796-1812 if you have any questions. While registration will be taken the day of camp, advance registration will guarantee t-shirt size.

REGISTRATION

Participant's Name: _____

Address: _____ Phone: _____

Youth T-Shirt Size: S M L **OR** Adult T-Shirt Size: S M L XL XXL

Grade entering this fall: _____

CAMP WAIVER FORM

*****Must be signed to participate*****

1. The undersigned is registering individually or as the parent/legal guardian of a minor child or both. As used below, registrant is an adult registering for an activity individually or as a parent/legal guardian of a minor child.
2. Recognizing the possibility of physical injury associated with the use of the recreational facility and engaging activity program, and in consideration of the Riverside School District accepting registrant for its program, the undersigned hereby assumes any risk and release, discharges and otherwise indemnifies the Riverside School District, its employees and agents against any claim for injuries received by the registrant and/or minor(s) as a result of participation in the program and activity or use of the recreational facilities or during transport to or from the same, which transportation is hereby authorized.
3. The undersigned hereby gives consent for emergency medical care prescribed by a licensed physician or doctor of dentistry. This care may be given under whatever circumstances are necessary to preserve life, limb or well-being of the registrant and/or minor(s).

Print Name of Parent/Legal Guardian: _____

Signature of above (required): _____ Date: _____

In the event of an emergency call: _____

Phone: _____

Return by mail to
Riverside High School c/o Dave Bors
585 Riverside Drive
Painesville, OH 44077
Cash or Make checks payable to Riverside Football