

Bruin Football Camp - 2018

For 1st, 2nd, 3rd and 4th Graders

A Non-Contact, Fundamental Football Camp



Dates-July 23-25(Monday - Wednesday)

10:30 AM - 12:00 Noon

Northwest Park (Across From Capital High School)

Eligibility: For students who will be in 1st through 4th grades at the beginning of next school year. Campers will learn and work with people in their own age group.

Equipment: Shorts or sweats, T-shirt or sweatshirt, and shoes/cleats.

Insurance and medical care: Campers must have current medical insurance. Coaches with experience in treating athletic injuries will be present at all sessions. Please provide your family's insurance provider on the application form.

Individualized Instruction: An emphasis will be placed on the proper techniques and fundamentals used in developing football skills. These include: blocking, tackling, passing, receiving, kicking, and other specialties such as long snapping, punting and kicking.

Coaches: Capital High Bruin Staff and Guest Coaches currently playing college football and Bruin players.

Cost: \$35.00 -- Includes: T-SHIRT, GATORADE, and AWARDS.
FAMILY RATE: 2 campers \$45, 3 campers \$65
\$35.00 -- Day of Camp. So Sign up Early! (Late sign-up will be 20 minutes before camp begins)
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Application Form

NAME: _____ **PHONE:** _____
GRADE(NEXT FALL): _____ **T-Shirt Size (YS, YM, YL, adult small, adult medium)**
PERSON TO CONTACT IN CASE OF EMERGENCY: _____ **PHONE:** _____

I hereby register my son for the above described camp and authorize the staff to direct him in participation in camp activities. My child has no medical or emotional problems which may affect his ability to safely participate in this camp. The camp staff is authorized to attend to any health problem or injury my son may incur while attending camp. I will allow the involved hospital and/or doctor to administer the required treatment of an emergency condition. I also understand that all incurred costs are my personal responsibility and that CAPITAL HIGH SCHOOL or BRUIN CAMP does not have insurance coverage for injuries to football camp participants. Camp will provide insurance as a secondary coverage only.

PARENT OR GUARDIAN SIGNATURE: _____

*Make Checks payable to **BRUIN CAMP**. Return application form with payment to Coach Mihelish- BRUIN CAMP, *554 Toole Court, Helena, MT 59602. **PLEASE WRITE ONE CHECK FOR MULTIPLE CAMPERS and PROGRAMS.** For more information call 324-2592 or 459-2802. Or email at kmihelish@helenaschools.org
Download a form at: <http://chs.helenaschools.org/football/> **LIL'GUY CAMP**