

Beavercreek High School Football

2011 Camp Higher Ground Registration Form

The entire BHS football team will be going on a retreat to Camp High Ground in West Harrison, IN. (www.hgcrc.org). This will be a great opportunity for the team to get away and install our schemes for the 2011 season and most importantly to bond together as a team. The camp will run July 9-11. The cost of the camp will be \$140 and includes bus transportation and all meals. Registration deadline is Monday June 27, 2011.

Checks should be made payable to "Beavercreek Football Club" – All money and registration forms will be collected on Monday June 27th, 2011 at 8:00am in the BHS weight room

Address _____ City _____ Zip Code _____

Phone _____ Grade (Fall 11) _____ Date of Birth _____

Parents Names _____ Email _____ Cell Phone _____

WHAT TO BRING: Please pack everything you need for a three day get away. All football equipment needed for the camp will be distributed- prior to departure. Players should **NOT** bring their cell phones. All coaches will have their cell phones in case an emergency arises.

RULES: All school rules apply and will be enforced at the camp. Players who choose not to follow the rules will be asked to leave camp and their parents will be required to come get them and take them home. **NO** refunds will be awarded.

I the undersigned, being the parent and/or legal guardian of (child name) _____ understand the risks involved and hereby consent for my child to participate in the activities or use the facilities of Camp Higher Ground & The Beavercreek Football Club. I hereby release, indemnify and hold harmless Camp Higher Ground, the Beavercreek Football Club, and its Board Members, Agents, and Assignees from any liability, claims, actions, demands and judgments arising out of injury or loss sustained by the above named child or myself in connection with the performance camp.

Parent or Guardian Signature _____ Date: _____

Name of Doctor _____ Phone: _____

Allergies & Special Medication _____ H

Other _____

In my absence, the Beavercreek High School Football coaching staff is authorized to obtain emergency medical care for my child, including an ambulance, if deemed necessary.

Parent or Guardian Signature: _____ Date: _____

Registration Fee \$ _____ Cash _____ Check _____ (Check#) _____

Date Received _____ Received by _____