



2017 FESTUS FOOTBALL CAMP

- DATE:** Monday July 10th – Friday, July 21st
- LOCATION:** Festus Football Game Field
- COST:** \$30.00 includes the following:
- Fees for the clinic
 - T-shirt
 - Camp instruction
 - Make check payable to Festus R-6 School
- TIME:** Monday – Friday 8:00-10:30 a.m.
- PAPERWORK:** Camp Form and paperwork may be mailed to
Festus High School
C/O Russ Schmidt Head Football Coach
501 Westwind Drive
Festus Mo. 63028
- NOTE:** Be sure to come prepared; t-shirt, shorts, and
football cleats. We will provide water.

I _____ am the parent or guardian of
_____ (player). I hereby give permission for said
player to attend and participate in the Festus Football Camp. I understand
the preceding statements and that injury is a part of athletic
competition. I will not hold any camp workers or Festus Schools
responsible for any injuries which may occur.

**WE WILL NEVER CANCEL CAMP DUE TO WEATHER. IN THE EVENT
THAT HEAT OR LIGHTENING BECOMES AN ISSUE WE WILL MOVE
OUR INSTRUCTION INSIDE OUT OF THE ELEMENTS.**

CHECK # _____ DATE _____