

Authorization for Emergency

Medical Treatment

In case of a medical emergency or accidental injury concerning my child, I hereby authorize the camp officials of Tiger Football Camp to perform or obtain for the benefit of my child any emergency medical care they deem necessary. In my absence, I further authorize the camp officials to consent to any necessary x-ray examination, anesthetic, medical or surgical diagnosis of treatment, and/or hospital care concerning my child.

Parent/Guardian (Signature Required)

Date

Relationship

Release of all Claims

In consideration of the acceptance of my registration form and the permission granted my child to enter the premises and participate in the Tiger Football Camp. I do hereby, for myself and my child, our heirs and assigns, forever waive, release, remise, and discharge the owners, operators, and sponsors of said premises, said camp activities, any vehicle and equipment used therein, and their respective servants, agents, officers and officials, and other participants in said camp activities, of, from and against all claims, demands, actions, causes of actions of any sort, and any and all liability or injuries sustained by my child and/or his or her property, arising out of or connected in anyway with, my child's participation in said camp activities, even though such liabilities or injuries may arise out of negligence or carelessness on the part of persons or entities mentioned above. I understand that participants in said camp may sustain serious accidental injuries and/or property damage. I know the inherent risks involved in the game of football. I agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable for damages. I agree that this waiver, release, and assumption of risk is to be binding on my heirs and assigns forever.

Parent of Guardian (Signature Required)

**Burlington-Edison
Tiger Football
Spring Camp
2019**

nunc coepi



Tiger Football
C/O Herb Lehman
301 N Burlington Blvd
Burlington, WA 98233

**Burlington-Edison
Tiger Football
Spring Camp
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May 28- June 20, 2019
Times Vary
(See schedule)

**Pre Camp 7 on 7 and Lineman Workouts*
May 28- 30
3-4pm on Kirkby Field

Tiger Football Camp

PURPOSE

We are excited to kick off the 2018 football season with spring ball this June. The schedule will be tight--we won't be on the field long each day but will be extremely productive with the time we do have. All players must hit the field in playing shape. If you are not involved in a spring sport that keeps you active, you must lift weights, etc. to prepare for spring camp.

- Camp goals are:**
- Have fun
 - Learn football fundamentals
 - Learn Tiger offense and defense schemes
 - Give coaches a chance to evaluate players
 - Prepare for Blue & Gold Scrimmage
 - Prepare for Summer Football Camp
 - Prepare for the upcoming Season/Playoffs
 - Be part of the BE Tiger winning tradition

This is a full contact camp. The student athletes will participate in a safe and fun competitive environment. You will get time for instruction and team building. In addition to substantial practice time and competition for positions for the fall, you will learn the foundations of championship football: attitude, discipline, work ethic, pride, and the TEAM concept.

Camp Site

Burlington-Edison High School

Kirkby Field (May 28-June 20, 2019)

Cost

\$50 for grade 9-11 athletes. This price includes: **T-shirt, mouth piece, and socks for the fall.**

Note: Scholarships are available with work programs.

*Players will be fundraising to offset camp/equipment price

Eligibility

Any football player to be a sophomore or older.

What to Bring

Football shoes, shorts, athletic shoes. Be prepared for variations in weather.
Football Equipment is issued May 29th at 3 PM

For pre-registration, mail the registration form and check payable to:

B-E Football Booster Club

Mail to:

Tiger Football Camp

P.O. Box 294

Burlington, WA 98233-3310

REGISTRATION FORM

Name _____

Grade _____ DOB ____ / ____ / ____

Phone # _____

Address _____

City _____ State _____ Zip _____

Parent/Guardian _____

Phone # _____

T-shirt size (Men's) S M L XL XXL 3XL

Short/Pants S M L XL XXL 3XL

**REVERSE SIDE OF REGISTRATION
FORM MUST BE COMPLETED AND
SIGNED.**

FOR ADDITIONAL
INFORMATION CALL:
HERB LEHMAN
360-757-4074 EXT 3372

