

CAMP INCLUDES...

- Camp T-Shirt
- MVP Awards
- Individual Training by Position
- Defensive Position Technique
- Offensive Position Technique
- Tackling Circuits
- 7 on 7 Scrimmage Periods
- Team Self Periods
- 11 on 11 Team Periods
- Team-Building Environment
- Qualified, Experienced, Enthusiastic Coaching

CAMP CHECKLIST: *You Will Need...*

- Soft shell helmet (optional)
- Soft Shell Shoulder pads (optional)
- Mouthpiece
- Practice Jersey
- Extra Socks
- Sunscreen
- Water/Sports Drinks
- Light Snack
- Medications (Inhaler etc.)
- A Winning Attitude

Camp Schedule:

Subject to Change

Day 1	4:00 pm – 7:00 pm
Day 2	9:00 am – 5:00 pm
Day 3	9:00am - 12:00pm

FIT 1 Athletics Sports Camps



Welcome to the Commitment to Excellence Football Camps. Our camps stress the fundamental techniques needed to play football. All of our instructors are excellent high school and college coaches. We will teach skills which are vital to the athlete and will allow the athlete to reach his fullest potential. Our staff will ensure that your players are provided with a high energy and fast-paced program in an environment that provides competition in the safest setting possible.

Thank you,

Ryan Reynolds
Camp Director
Fit 1 Sports Camps

Contact Information:

Cell: 530-370-3663

E-mail: rsc21@sbcglobal.net

FIT 1 Athletics Sports Camps

www.elitefittraining.com

Presents

Commitment to Excellence Team Football Camp



Become a Champion

HIGH SCHOOL TEAM FOOTBALL CAMP

June 28-29-30

SUTTER UNION HIGH SCHOOL
2665 Acacia Avenue
Sutter, CA 95982

Required Authorization to Consent to Treatment of a Minor

I/We the undersigned parent(s) of _____, a minor, do hereby give permission for trainers and coaches of Elite Fitness Sports Camps to seek emergency care for my/our child at a local medical facility if I/We cannot be reached in the event of illness or injury. It is understood that this is authorization is given in advance of any specific diagnosis or treatment being required, and I/We will be contacted in the event of illness or injury as soon as possible. This authorization shall remain effective until camp ends on _____ unless sooner revoked.

Parent/Guardian Signature Date

PERSON TO NOTIFY IF PARENT/GUARDIAN IS NOT AVAILABLE

Person to Notify Relationship to Camper

Day Phone Evening Phone

MEDICAL INSURANCE CARRIER

Insurance Company Group Number

I.D. Number Insurance Phone Number

COMMITMENT TO EXCELLENCE



**2019 TEAM FOOTBALL CAMPS
REQUIRED RELEASE OF LIABILITY**

I/We, the parent/guardian of the aforementioned child, hereby give permission for my/our child to participate in the FIT 1 Athletics Sports Camps. I/We understand there are obvious known risks/dangers inherent in the participation in this program, but not limited to injuries sustained through a fall or loss of personal property, and I/We voluntarily agree to assume such risks.

In consideration of FIT 1 Athletics permitting my child's participation in camp, based on my reputation that my/our child is in proper physical health and condition to participate, I agree: 1) to assume all risk of injury to my child and all risk of damage or loss of my property arising from my child's participation in the camp, 2) to release and forever discharge FIT 1 Athletics, its officers, agents, host sites, employees, and coaches, from any and all claims or any injury including death, and for any property damage or loss which may be suffered by me or my child arising out of any connection with my child's participation in the camp.

I have carefully read this agreement and fully understand its contents. I am aware that this release of liability and a contract between the camp and myself, on behalf of my/our child, and sign of my own free will.

Parent Signature Date

Printed Name

2019 Fit 1 Athletics Sports Camps

Registration Form

Please complete **registration, consent and release of liability** sections and return with payment.

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Email: _____

Emergency Phone: _____

School: _____

Circle Shirt Size: Small Medium Large XI XXI

Athlete's Restrictions on Participation:

Mail Registration Form and payment payable to:

Fit 1 Athletics
1154 Teesdale Rd
Yuba City, CA. 95991

CAMP FEE - \$50.00 per athlete

Total Amount Paid _____