

# Future Champs Spartan Football Camp (A4K)

A Non-Contact, Fundamental Football Camp



**July 24<sup>th</sup>-July 27<sup>th</sup> (Tuesday - Friday)**  
**10:30 AM – 12:00 PM for Grades 5 - 8**  
**Sentinel High School**

**Eligibility:** For students who will be in the **5<sup>th</sup>** through **8<sup>th</sup>** 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:** Spartan Football Coaching Staff  
Guest Coaches currently playing college football and Ex-Spartans football players

**Cost:** **\$45.00** -- Includes: T-SHIRT, GATORADE, and AWARDS FOR ALL CAMPERS.  
**\$50.00** -- 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:** \_\_\_\_\_ **PARENTS EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**GRADE(NEXT FALL):** \_\_\_\_\_ **T-Shirt Size (Youth) S, M, L** \_\_\_\_\_ **or (Adult) S, M, L, XL, XXL** \_\_\_\_\_

**PERSON TO CONTACT IN CASE OF EMERGENCY:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**FAMILIES INSURANCE PROVIDER and POLICY#:** \_\_\_\_\_

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 SENTINEL HIGH SCHOOL OR Athletics 4 Kids 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 **Athletics 4 Kids**.  
Return application form with payment to:  
Athletics 4 Kids 6111 SKYVIEW DR MISSOULA, MT 59803  
**PLEASE WRITE ONE CHECK FOR MULTIPLE CAMPERS and PROGRAMS**  
For more information call or text 360-0276. Or email at daneoliver83@gmail.com