



2021 LONGHORN FOOTBALL CAMP

For Incoming 7th-9th Graders

PROGRAM DETAILS:

Dates: 7/21-23

Time: 5:00-8:00pm

Payments of **\$50.00** must be made **ONLINE** or by **CASH, CHECK** or **MONEY ORDER**. There are **NO** refunds for days missed. Please make check/money order payable to: **GRHS Activity Fund #4.**

- Cash (Receipt # _____)
- Check (Check # _____)

SHIRT SIZE:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Youth Medium | <input type="checkbox"/> Adult Large |
| <input type="checkbox"/> Youth Large | <input type="checkbox"/> Adult X-Large |
| <input type="checkbox"/> Adult Small | <input type="checkbox"/> Adult XX-Large |
| <input type="checkbox"/> Adult Medium | <input type="checkbox"/> Adult XXX-Large |

QUESTIONS:

Please contact Campus Athletic Coordinator Nick Cavallo

- **Email:** ncavallo@lcisd.org **Phone:** 832-223-4360

INFORMATION FOR PARENTS:

All campers will receive a camp shirt. Please bring a **water bottle** towel, shorts, socks, shoes, shirt, and sunscreen each day. Your children will be coached in the following focus areas—

- *Strength & Conditioning:* instruction on safety/ technique.
- *Nutrition:* weight loss/gain, and healthy eating habits.
- *Academics:* study habits, note taking, listening, proper behavior, and how to study.
- *The Longhorn Way:* Leadership, accountability, character, and responsibility.

PARENT/GUARDIAN CONSENT & REGISTRATION FORM:

By signing, the parent/guardian agrees to all terms and conditions included in the Physical/Athletic Participation Form and agrees to waive all liability of LCISD and its employees who are staffing the program. The parent/ guardian also agrees that the staff may dismiss any participant who they deem disruptive and no refund will be issued for missed participation. Each student-athlete must have a recent physical on file and provide their own registration forms with parental consent.

ATHLETE INFORMATION FOR 2021-2022:

Grade: _____ Age: _____

Athlete's Name (Please Print)

Parent's Name (Please Print)

Parent's Signature

Date

Parent's Address

Parent's Phone

***THIS ORGANIZATION AND ITS ACTIVITIES
ARE NOT RELATED TO OR SPONSORED BY
LAMAR CONSOLIDATED ISD.***