

EDMONDS WOODWAY HIGH SCHOOL FOOTBALL TEAM

SPRING FOOTBALL CAMP



When: Monday April 7th and Tuesday April 8th
1:00pm-3:30pm

Where: Edmonds District Stadium
at Edmonds-Woodway High School

Register by phone or mail, see below!
Cost \$30.00



Who can attend? Boys and Girls grades Kindergarten to 6th Grade



Wear comfortable clothes and tennis shoes
Parents can come and stay or drop in at anytime,
Camp will be over each day at 3:30pm

Parents, April 7th and 8th are during Spring Break
This is a great activity for the kids while you work or play

Space is limited so register now!

Please see reverse for registration form and release information. Please fill out and send in ASAP.

Spring Football Camp Registration:

Register by: **Mail, Phone or Email**

Make checks payable to: **Edmonds School District or ESD**

Mail check & form to:

Edmonds-Woodway HS
c/o John Gradwohl, Head Coach
7600 212th St SW
Edmonds, WA 98026

– or –

Call (425) 431 – 6226 and leave a message or send an email
to gradwohlj@edmonds.wednet.edu with following info:

Parent Name – Child Name – Grade – Contact Number

Please bring form and check with you to clinic by 12:45pm!

EDMONDS WARRIORS JUNIOR FOOTBALL

Information & Sign-ups

Edmonds Warriors Junior Football provides a positive introduction to youth football & cheer, and a program that prepares athletes for the challenges of high school sports.

Our program is coordinated with the Edmonds-Woodway High School football program to increase experience, knowledge, skills and participation. Register online at www.edmondswarriors.com:

Questions?

We're available the first and third Tuesday of each month from 6:00-7:00pm at Edmonds-Woodway High School

Visit our website for more information

www.edmondswarriors.com

The Edmonds School District does not sponsor or endorse the activity and/or information contained in this material.

Assumption of Risk/Permission to Participate

As a parent or guardian of a student requesting to register for participation in the 2014 Edmonds-Woodway Spring Football Camp, I hereby acknowledge that I have read, understood, and agree to the following:

1. I acknowledge that the sport of soccer entails many risks of injury, even when played in an instructional clinic environment. These risks of injury include, but are not limited to, death, serious neck and spinal injuries (which may result in complete or partial paralysis), brain damage, serious injury to virtually all internal organs, bones, joints, ligaments, muscles, tendons, and other aspects of the muscular skeletal system and serious injury or impairment to other aspects of the body, general health, and well-being.
_____ (Parent initial)
2. I further certify that my child has no medical or physical conditions which could interfere with his/her safety in this activity, or else I am willing to assume and bear the costs of all risks that may be created, directly or indirectly, by any such condition.
_____ (Parent initial)

Medical Information

The following special health problems should be noted:

In the event of an emergency, I wish the following person to be notified in case I cannot be contacted:

_____ Phone _____

Medical Release

In the event of an accident or illness, I understand that reasonable effort will be made to contact the parent/guardian immediately. However, if I am not available, I authorize the Edmonds School District to secure emergency medical care as needed.

Name of Preferred Doctor _____ Phone _____

Medical Insurance

I understand that I am assuming financial responsibility for medical expenses that may arise from my child's participation and that **the Edmonds School District requires but does not provide medical insurance for my child.** I certify that my child has current medical coverage under the following plan:

Health Insurance Carrier: _____ Plan Number (required): _____

All participants are required to have medical or student accident insurance. Student accident insurance is available through your school. Contact your school's main office, head coach, or school athletic trainer for information.

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Although I understand that the Edmonds School District will make reasonable effort to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in this activity, including physical injury and/or death. Being fully aware of the risks, I hereby give

permission for _____ who attends _____ to
(Student) (School)

participate in the 2014 Edmonds-Woodway Spring Football Camp, April 7th and April 8th, 2014, for the purpose of participating in football and the many skills it requires.

Parent/Guardian Name _____ Home Phone _____
(please print)

Address _____ Work Phone _____

Parent/Guardian Signature _____ Date _____