



2016 Individual and Team Camps
July 6-8 | GRADES 9-12
Hosted by UW-La Crosse Football

Camp utilizes full pads and allows individual position work as well as team competition, to give campers everything they need to be ready for a successful season.

- WHO:** Grades 9-12
- WHEN:** July 6-8
- WHERE:** UW-La Crosse
- COSTS:** Resident: \$215
Commuter: \$160
- CAMP INFO:** All camp info including schedule, locations, check-in & check-out, parking, & health forms will be emailed out prior to camp.
- INCLUDED:** Residents – All meals / Commuters – Meals between sessions
Camp T-shirt
- REGISTRATION:** Online @ www.uwlcamps.com
OR
Mail-in Registration Form
- ADDITIONAL INFO:** Players may register as an individual.
- Teams are encouraged to register. For team registration, please contact athleticcamps@uwlax.edu

Visit uwlcamps.com for online registration, printable registration, and more information!

2016 FOOTBALL CAMPS Individual & Team Padded Camp Registration Form



Please print clearly. We cannot process incomplete registrations. All information requested must be provided.

Participant's Full Name: _____

Grade (Fall 2016): _____ Height: _____ Weight: _____ T-shirt size (please circle): S M L XL XXL

High School: _____ Coach: _____

Primary Position: QB RB WR LB DB OL DL Secondary Position: QB RB WR LB DB OL DL

Participant's Full Name: _____

Grade (Fall 2016): _____ Height: _____ Weight: _____ T-shirt size (please circle): S M L XL XXL

High School: _____ Coach: _____

Primary Position: QB RB WR LB DB OL DL Secondary Position: QB RB WR LB DB OL DL

Address: _____

City/State/Zip: _____

Emergency Contact Name: _____

Phone #1: _____ Phone #2: _____

Email (necessary for confirmation and camp communication): _____

Special needs for participant(s): _____

Roommate Preference (resident campers only): _____

Please indicate:

Resident Camper
\$215

Commuter Camper
\$160

Amount Enclosed: \$ _____

Check enclosed, made payable to: *UW-La Crosse*

Return form to:
*UW-La Crosse Athletic Camps & Clinics
25A Mitchell Hall
1725 State St.
La Crosse, WI 54601*

WAIVER: Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. By signing this form I agree to hold harmless and indemnify UW-La Crosse, their officers, agents, and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if I cannot be reached in the event of an emergency.

Parent/Guardian Signature: _____

Date: _____

visit uwlcamps.com for online registration and more information!