



**2016 – Passing League**  
**June 19, 26, July 10, 17, 24 | Grades 9-12**

**Hosted by UW-La Crosse Football**

Weekly 7 on 7 team competitions will be combined with instruction by UW-L coaches. Teams will be given periods in the open field and periods at the 10 yard line. The clock is the only limiting factor in the number of plays that can be run.

- WHO:** Grades 9-12
- WHEN:** Sundays  
June 19, 26, July 10, 17, 24
- TIMES:** 3:30 – 7PM  
*Specific times will be communicated ahead of time*
- WHERE:** UW-La Crosse
- COST:** \$150
- REGISTRATION:** Online @ [www.uwlcamps.com](http://www.uwlcamps.com)  
OR  
Mail-in registration

Individual campers do not register for this camp. Instead, coaches should fill out their contact information on the registration sheet or online, and team rosters can be submitted at a later date.

Visit [uwlcamps.com](http://uwlcamps.com) for online registration, printable registration, and more information!

# 2016 FOOTBALL CAMPS

## Passing League

### Registration Form



*Please print clearly. We cannot process incomplete registrations.  
All information requested must be provided.  
Coaches should register their team for the Passing League*

Coach's Full Name: \_\_\_\_\_

High School: \_\_\_\_\_

School Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

On-site Contact Name (if-different): \_\_\_\_\_

Phone #1: \_\_\_\_\_ Phone #2: \_\_\_\_\_

Email (necessary for confirmation and camp communication) \_\_\_\_\_

Special needs for participant(s): \_\_\_\_\_

#### Passing League

Dates: June 19, 26, July 10, 17, 24

Times: 3:30 – 7 pm

Specific times will be emailed out

Ages: Grades 9-12

Cost: \$150 per team

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](http://uwlcamps.com) for online registration and more information!