



# SPARTAN Football Camp

**DATES:** Wed.—Fri., JUNE 15-17  
**TIME:** 6:00—8:00pm  
**FEE:** \$35.00 / **PLEASE MAKE CHECKS PAYABLE TO WES HILL**  
**AGES:** 6—14  
**LOCATION:** SSS HIGH SCHOOL FOOTBALL FIELD  
**INSTRUCTORS:** SSS HEAD COACH WES HILL & OTHER SPARTAN COACHES

## 2016 SPARTANS FOOTBALL CAMP

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_ SHIRT SIZE: YL AS AM AL AXL

PARENT'S NAME: \_\_\_\_\_

PHONE #: (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Does your child have any unusual conditions or allergies? YES NO EXPLAIN: \_\_\_\_\_

As parent of the above named child, I understand in sports activities there are incidents of accident and injury. I allow my child to participate voluntarily in these activities. I have read this agreement and understand its contents. I release and agree to hold harmless the Town of Smithfield Parks & Recreation Department and its agents from any claims arising out of injury to my child.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Return registration form & payment to: Smithfield Parks & Recreation Dept.  
P.O. Box 2344, Smithfield, NC 27577  
934-2148 / FAX 934-6554

*For Office Use Only*

AMOUNT PAID: \_\_\_\_\_ CASH/CHECK \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

