



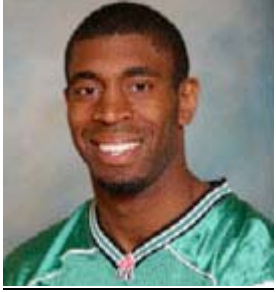







**"CAMP WITH THE GREY CUP CHAMPS"**

**Registration Info**

<p><b>Camp Head Coach</b></p>  <p>Matt Dominguez</p>	<p><b>QB Coach</b></p>  <p>Marcus Crandell</p>	<p><b>OL Coach</b></p>  <p>Jeremy O'Day</p>	<p><b>RB Coach</b></p>  <p>Neal Hughes</p>
<p><b>WR Coach</b></p>  <p>Dave McCoy</p>	<p><b>DL Coach</b></p>  <p>Marcus Adams</p>	<p><b>DB Coach</b></p>  <p>Anton McKenzie</p>	<p><b>LB Coach</b></p>  <p>Mike McCullough</p>
<p>May 3<sup>rd</sup> &amp; 4<sup>th</sup> in Regina - Mosaic Stadium</p> <p>Ages: Grades 10-12</p> <p>Cost: \$100 per camper (includes lunch)</p> <p>8:00am - Registration</p> <p>9:30am-11:30 - Practice 1</p> <p>11:30am-1:30pm - Lunch</p> <p>1:30pm - 3:00pm - Practice 2</p>		<p>May 10<sup>th</sup> &amp; 11<sup>th</sup> in Saskatoon - U of S Practice Field</p> <p>Ages: Grades 10-12</p> <p>Cost: \$100 per camper (includes lunch)</p> <p>8:00am - Registration</p> <p>9:30am-11:30 - Practice 1</p> <p>11:30am-1:30pm - Lunch</p> <p>1:30pm - 3:00pm - Practice 2</p>	

Players are required and responsible for providing their own football equipment (shoulder pads, helmet, pants, girdle w/ pads, knee pads, belt and mouthpiece).



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*\* Register early. There are limited spots available at each position\**

**Registration Info**

Athlete Info

Name : \_\_\_\_\_

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

City / PC: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

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

Grade: \_\_\_\_\_ (Grades 10-12 eligible)

Age: \_\_\_\_\_ Years Played: \_\_\_\_\_ Position: \_\_\_\_\_

T-shirt size: \_\_\_\_\_

*My signature below indicates my willingness to permit my child to participate fully in a physically rigorous program. It also indicates that my child is in good physical condition.. I herby assume the risk of all injuries to my child and herby release all coaches, staff and volunteers of the Matt D Football Camp from any and all liability which may result from injury to my child.*

*In case of emergency, if I can not be contacted I herby give permission for camp coaches to seek necessary medical attention.*

*I give permission for any pictures of my child taken during the camp to be used for future promotional material.*

Parent/Guardian Info

Parents/Guardian's name: \_\_\_\_\_

Relationship to athlete: \_\_\_\_\_ Emergency Contact #: \_\_\_\_\_

Parent/Guardian signature: \_\_\_\_\_

Please make Cheques\Money Orders payable to Matt D Football Camp and mail to the PO Box below.