

PINNACLE HIGH SCHOOL

FOOTBALL PREP CAMP



This camp will prepare current 7th & 8th graders to play high school football by teaching a variety of football-related skills in two sessions.

Session 1: (March 19 - April 25, Tues. & Thurs.)

The first session will focus on movement training for football including olympic lifting movements, running technique and change of direction.

Session 2: (April 29 - May 16, Mondays - Thursdays)

The second session will focus on individual positions and team football skills. Campers will learn offense and defense position fundamentals as well as team plays.

Both of these camp sessions are essential to those planning to play high school football. Camp will be instructed by the Pinnacle High School Football staff. \$100 fee covers registration for both sessions.

Questions? Contact Head Coach Dana Zupke at dzupke@pvschools.net

Name of Camp	Location	Gr.	Days	Dates	Times	Fee
Pinnacle High School Football Prep Camp	Weight Room & Stadium Field	7-8	Session 1: Tu & Th Session 2: M-Th	Session 1: 3/19 - 4/25 Session 2: 4/29- 5/16	Session 1: 5:00 p.m. - 6:00 p.m. Session 2: 6:00 p.m. - 8:00 p.m.	\$100

CUT ON DOTTED LINE AND RETURN COMPLETED FORM WITH PAYMENT TO COMMUNITY EDUCATION

PVSchools COMMUNITY EDUCATION ENRICHMENT REGISTRATION FORM

First/Last Name _____ Grade _____ Home School _____

Parent/Guardian's Name _____ Email Address _____

Street Address _____ City _____ Zip Code _____

Phone: Home (_____) _____ Work (_____) _____ Cell (_____) _____

Emergency Contact Name _____ Home (_____) _____ Work (_____) _____

Transportation: Parent Pick-up Walk Home Child Care Other _____ (Please send written notice if your child's way home changes)

Code	Name of Camp	Grade	Days	Dates	Times	Fee
CS1016	PHS High School Football Prep Camp	7-8	Session 1: Tu & Th Session 2: M-Th	Session 1: 3/19 - 4/25 Session 2: 4/29- 5/16	Session 1: 5:00 p.m. - 6:00 p.m. Session 2: 6:00 p.m. - 8:00 p.m.	\$100

You may register one of the following ways (registration must be received at least 24 hours prior to start date):

1 Register online at www.pvschools.net/enrichment 2 Bring or mail registration form and payment to Community Education, 15032 N. 32nd St., Phoenix, AZ 85032. Office hours are Monday-Friday, 8:00 a.m. - 5:00 p.m. Refunds are available until start of session and include a \$25.00 processing fee. A full refund and notification will be given only if classes are cancelled.

Payment Type: Cash Check# _____ (Make checks payable to Community Education)

You may pay by credit card by **registering online at pvschools.ce.eleyo.com**

MEDICAL RELEASE/APPROVAL

First/Last Name of Participant _____

Past Health _____

Past Injuries _____

Present Health _____

Medication _____

Allergies _____

Drug Sensitivities _____

Insurance Company _____

Name of Policy Holder _____

Policy Number _____

Please read carefully: I hereby authorize the Directors of the program to act for me in any emergency requiring medical attention. I agree to treatment by a licensed physician while attending this program and to assume all costs related to such treatment. I waive and release any and all rights and claims I have against Paradise Valley Unified School District or its representatives for damages which may be sustained by me/my child.

Parent/Guardian's Signature

Date

