



EMPIRE SPORTS ACADEMY LLC HIGH SCHOOL FOOTBALL CAMP



COLUMBIA HS TEAM CAMP REGISTRATION FORM

CAMP MISSION: TO PROVIDE A SAFE AND ENJOYABLE ENVIRONMENT FOR ALL PARTICIPANTS TO LEARN THE FUNDAMENTALS OF FOOTBALL. THE CAMP WILL FEATURE SPEED/FLEXIBILITY TRAINING, POSITIONAL INSTRUCTION, AND A COMPETITIVE GAME ENVIRONMENT.

WHEN: CAMPS WILL BE HELD MONDAY 8/9 - FRIDAY 8/13 5-7:30pm
*PLEASE HAVE CAMPERS READY TO START PROMPTLY AT 5:00 !

WHO: OFFERED TO ALL COLUMBIA STUDENTS WHO WILL BE ENROLLED IN GRADES 9 THROUGH 12 IN THE FALL OF 2021.

ATTENDANCE: THIS IS A TEAM EVENT. ATTENDANCE IS EXPECTED AND HIGHLY RECOMMENDED FOR ALL STUDENTS WHO ARE TRYING OUT FOR VARSITY OR JV FOOTBALL.

WHERE: SHAKER HIGH SCHOOL. 445 WATERVLIET-SHAKER ROAD. LATHAM, NY
NOTE: TRANSPORTATION IS NOT PROVIDED TO SHAKER HIGH SCHOOL.

REQUIRED EQUIPMENT: SAFETY IS A TOP PRIORITY. ALL PARTICIPANTS MUST BE PROPERLY EQUIPPED IN ORDER TO PARTICIPATE. A MOLDED MOUTHGUARD IS REQUIRED EVERY SESSION. THE **FIRST TWO** NIGHTS (HELMETS AND SHOULDER PADS). THE **LAST THREE** SESSIONS (FULL PADS). EQUIPMENT WILL BE ISSUED AFTER FORM AND PAYMENT ARE SUBMITTED.

COST AND REGISTRATION:
PRE-REGISTER PRIOR 7/24: \$60 REGISTER AFTER 7/24: \$ 70

SCHOOLS ATTENDING TEAM CAMP:
SHAKER HS (HOST SCHOOL) / COLUMBIA HS / BALLSTON SPA HS / GREEN TECH HS.

CONTACT FOR INFORMATION:
BOB TREACY, HEAD FOOTBALL COACH, COLUMBIA HIGH SCHOOL
(C) 518.588.5884. (EMAIL) btrace@nycap.rr.com

Policies: Rain days: please check with your coach for cancellations due to weather. Arrangements will be made to maximize instruction time. Disruptive participants will be sent home without a refund. The Empire Sports Academy is fully insured. The Empire Sports Academy is not responsible for lost or stolen items. There will be no refunds after the first day of camp. You are responsible for your child promptly at the end of camp.

PAYMENT INFORMATION

RETURN THIS REGISTRATION FORM WITH A CHECK OR CASH TO COACH BOB TREACY OR MIKE OLIVER IN THE AMOUNT OF \$60 OR \$70 IF AFTER 7/24. **MAKE CHECKS PAYABLE TO: ESA HIGH SCHOOL FOOTBALL CAMPS**

CHILD'S NAME: _____

2021 GRADE: _____ HIGH SCHOOL: COLUMBIA HIGH SCHOOL

PARENT NAME: (PRINT) _____

PARENTS EMAIL: _____

PARENT CELL # : _____ PLAYERS CELL #: _____

CHILD'S ADDRESS: _____

CHILD'S HEALTH CONCERN, IF ANY: _____

*I, as parent or guardian, give the child named above permission to attend & Participate in the **ESA High School Football Camp**. I verify that the child listed above is physically able to participate in the activities at the camp. I also understand that the North Colonie School District, EMPIRE SPORTS ACADEMY and the camp coaching staff will not be held responsible for injury to person or property. I have carefully read the above and agree to all terms.*

Signature _____ Date _____

YOUR CANCELLED CHECK IS YOUR RECEIPT