

**HEAD COACH BEAU LABORE's** 

## PONY YOUTH DOTBALL CAMP

WHEN: • Camp will be assisted by Ponies Varsity players

July 29 – Aug 1 • Can	np focuses on football fundamentals of athleticism:
11:00am- 1:00pm	Ball handling   Passing & receiving   Footwork

LOCATION:

COST:

- ng & receiving | Footwork Players will apply these fundamentals through drills and competitive games Stillwater Area High School • Every participant will play all positions
  - Football Practice Field Character and sportsmanship will be addressed everyday This is also an opportunity for youth players to connect
- with the guys they will watch on Friday Nights! \$70 if registered by July 22, \$80 thereafter
  - · Player needs to bring: cleats, water and a good attitude
  - If it rains we will have camp if possible
  - This is a "non-contact" camp

Questions? - Please contact Coach LaBore E: laboreb@stillwaterschools.org P: 651-592-4324

Includes camp t-shirt. Walk- ups welcome

PREFERRED REGISTRATION METHOD: scvaa.org/SCVAAB/football \*online registration available until the day of camp

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## **PONY YOUTH FOOTBALL CAMP - REGISTRATION FORM**

Please fill out all information below

Make check payable to: SCVAA Football Camp - Address SCVAA PO Box 44, Stillwater MN 55082

COST: \$70 if registered by July 22, \$80 thereafter. Includes camp t-shirt. Walk-ups welcome.

Player Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Player Grade (Fall 2023): 2345 Shirt Size: YS YM YL S M L XL

Address:

Email:

PARENT/GUARDIAN AGREEMENT: I, the parent/guardian of the registered player, a minor, agree that the player and I will abide by the rules of the Camp, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with this sport and in consideration for the Pony Youth Camp accepting the player for its programs and activities, I hereby release, discharge and/or otherwise indemnify Coach Beau LaBore and his camp and its affiliated organizations and sponsors, their employees and associated personnel, including the owners of fields and facilities utilized for the programs, against any claim by or on behalf of the registrant as a result of the registrants participation in the program and/or being transported to or from the same, which transportation I hereby authorize.

Signature (agreement):

Parent Name: