



13 Black Road, Berlin, VT 05602
 802-229-9653
 cwolf@sbschools.net
 www.vtfootballcamps.com

2010 VASFC Enrollment Application

To pre-register, please complete this application, the following waiver form and mail it along with a \$25.00 NON-REFUNDABLE CONFIRMATION DEPOSIT per camp selected to: **Chadde Wolf, Executive Director, VT All-Star Football Camps, 13 Black Road, Berlin, VT 05602.** Your canceled check serves as confirmation of your registration. You will receive a confirmation letter detailing all important issues regarding your participation in the camps. Please retain the letter for your records as it represents your official Camp notification.

PLEASE CHECK EACH CAMP FOR WHICH YOU ARE ENROLLING. We'll credit your multiple camp tuition discounts.
 Questions Call 802-229-9653 or Register On-Line @ VTfootballcamps.com

	<i>Your weeklong (5 Nt) Football Camp Tuition Charges</i>	<i>Your 1 day QB/Rec Specialty Clinic Tuition Charges</i>
Enroll on or before April 1:	\$165.00	\$60.00
Enroll between April 2 & June 30:	\$180.00	\$70.00
Enroll after June 30 or "At The Door":	\$195.00	\$80.00

Attend both
a Clinic & a weeklong
Camp and
You save!

- Southern VT All-Star Football Camp, July 12-16 So. VT QB/Rec Clinic, Sunday, July 11
Rutland, VT + Athletes entering Grades 5-12
- Tri-State All-Star Football Camp, July 19-23 Tri-State QB/Rec Clinic, Sunday, July 18
Brattleboro, VT + Athletes entering Grades 7-12
- Northern VT All-Star Football Camp, July 26-30 No. VT QB/Rec Clinic, Sunday, July 25
South Burlington, VT + Athletes entering Grades 5-12

VT. ALL-STAR FOOTBALL CAMPS "PRO-STYLE" COMBINE WORKOUTS: *For Juniors & Seniors Only!*
All Combines are run on Thursday of your Camp Week. Time: 1pm-4pm. Please arrive at 1pm for Check-in!
If you want to play College Football, you should be at your Camp's Combine workout!
Results of your 8 Tests will be summarized & presented to College Coaches at Camp & offered to other Colleges!

- Southern VT, Thurs, July 15 Tri-State, Thurs, July 22 Northern VT, Thurs, July 29
 Cost: \$50.00 . No Multi-Camp or Sibling Discounts. Includes Personalized Summary Report.

Are you a repeat Camper? _____ If so, what years? _____ Preferred Adult T-Shirt Size: _____

Personal Information: Name: _____ M/F: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent Name(s): _____

Home Ph #: () _____ Email: _____

Work Ph #: () _____ Cell Ph #: () _____

Football Information: School/Team: _____

Head Coach: _____ Grade Ent. in Fall: _____ # Yrs Playing Football: _____

Please circle the Primary Offensive & Defensive Position that you play :

OFFENSE: QB RB WR TE OL **DEFENSE:** DB OSLB ISLB DE DL

Medical Information: D.O.B.: _____ Age: _____ Ht: _____ Wt: _____

Of what, if any, medical conditions, past problems, or concerns does our athletic trainer need to be made aware?: _____

_____ Date of last Physical Exam: _____

Group Insurance Name: _____

Policy # / Subscriber ID #: _____ Group #: _____



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Camper Name: _____ M/F: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Parent Name(s): _____
 Home Ph #: () _____ Email: _____
 Work Ph #: () _____ Cell Ph #: () _____

2010 Vermont All-Star Football Camps

PARENTAL RELEASE FORM & WAIVER OF LIABILITY

My SON / DAUGHTER (circle one),

(Name of Child)

has had a physical exam within the last two years
& is physically fit to participate in the

Check below the name of camp(s), clinic(s) and/or combine(s) your child is attending

SOUTHERN VERMONT ALL-STAR FOOTBALL CAMP, July 12-16, 2010

So. VT QB/Rec Clinic, July 11, 2010 So. VT Combine, July 15, 2010

TRI-STATE ALL-STAR FOOTBALL CAMP, July 19-23, 2010

Tri-State QB/Rec Clinic, July 18, 2010 Tri-St. Combine, July 22, 2010

NORTHERN VERMONT ALL-STAR FOOTBALL CAMP, July 26-30, 2010

No. VT QB/Rec Clinic, July 25, 2010 No. VT Combine, July 29, 2010

I authorize the event athletic trainer to act on my behalf according to his/her best judgement (including immediate medical attention and/or transportation to an area medical facility) in the event of any emergency and I cannot be contacted. I also authorize area hospital medical personnel to act on my behalf in the event of any emergency requiring transport to a medical facility and I cannot be contacted. Furthermore, I understand that participation in the sport of football carries inherent risk of physical injury. I furthermore agree to absolve Vermont All-Star Football Camps, their employees & independent contractors, the High School or College upon whose property the event(s) is/are held of any liability resulting from injury, catastrophe, death or other distress incurred while participating in the chosen event(s).

SIGNATURE OF PARENT OR GUARDIAN

DATE