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www.MCYMCA.com/OnlineRegistration

TEAMWORK & TOUCHDOWNS

2021 Tiger Football Camp for 1st– 6th Graders R.O. HIGH SCHOOL PRACTICE FIELD

The Tiger Football Camp will be under the direction of Red Oak High School Varsity Football Coach Michael Nordeen and his assistants.

Camp participants will receive the 2021 Red Oak Football Camp t-shirt if registering by July 21st.

Campers should wear shorts, tennis shoes or rubber based cleats. Bring own water bottle.

WHEN: August 2nd – 1st—3rd grade
August 3rd - 4th—6th grade

TIME: 10:00am—12:00pm both days

COST: By July 21st July 22nd - Start of Camp
 \$20.00 \$30.00

LOCATION: RED OAK HIGH SCHOOL
PRACTICE FIELD
(West of the High School)

CONTACT: 712-623-2161
www.MCYMCA.com





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2021 TIGER FOOTBALL CAMP

Or Register Online @ www.MCYMCA.com/OnlineRegistration

EARLY REGISTRATION DEADLINE: July 21st

Please return registration form to YMCA, 101 E Cherry Street, Red Oak, Iowa 51566.

For more information, contact the YMCA at (712) 623-2161.

Participant's Name: _____

Address: _____ City, State, Zip: _____

Parent/Guardian Name(s): _____ Contact #: _____

Grade Entering Fall 2021: _____

COST:

SHIRT SIZE (circle one): YOUTH S, M, L, XL

By July 21st: \$20

ADULT S, M, L, XL

After July 21st: \$30

Medical Insurance Company/ Policy Number: _____

Allergic reactions _____

Medications Currently Taking _____

Any past illnesses or other information that would be useful in the event medical treatment is necessary:

THE UNDERSIGNED parent(s)/guardian(s) of _____, who is a child under the age of 18 years, with understanding of the potential risks of injury/illness to the child by reason of the child's participation in the following activity: **YMCA's 2021 Tiger Football Camp** does/do hereby consent to the child's participation in the activity.

The potential risks of participation include, but are not limited to, the risk of injury/illness to the child from contact with other participants and contact with or use of equipment used in the activity.

The parent(s)/guardian(s) affirm that by signing this consent each understands that participation of the child is voluntary and that the parent(s)/guardian(s) have explained to the child that this means that the child is free at any time to stop participation in the activity.

By this consent and with the child's continued participation in the activity, the parent(s)/guardian(s) voluntarily accept the risk of injury/illness to the child by reason of the child's participation in the activity.

Parents also release the YMCA, now and for all time, to take and use any video/film/footage/recording/photo/narrative taken of the child while in participation of said program for publication, display, sale or exhibition thereof in promotions, advertising and legitimate business use without any compensation to, and/or claim, by me.

THE UNDERSIGNED provide the following contact information to obtain consent to treat the child in the event of injury or illness during participation:

Name (MUST be parent/guardian)

Address

Telephone No.

If the contact person named above cannot be reached, the undersigned give consent for supervisory staff to provide the child emergency medical care and treatment and further necessary and reasonable treatment by a licensed professional caregiver selected by supervisory staff.

Parent/Guardian Signature

Print Name

Date