



**STATE COLLEGE ASSEMBLY OF GOD**  
**FOOTBALL SUMMER CAMP**  
 2201 University Drive Extension, State College, PA 16801  
 Phone: 238-3800, Fax: 238-5430  
 website: <http://www.scassembly.org/football>  
 email: [football@scassembly.org](mailto:football@scassembly.org)  
 txt messaging: <http://trunc.us/fNUh13> to sign up



# 2015 Football Summer Camp – July 27-30 for Boys ages 6-13

**Camp Director:**  
John Potter, Football Program Director

**What to Wear:**  
Shorts, T-Shirt, Cleats

**Cost (Note there are no refunds once signed up):**  
 \$45 if you register after JUNE 1 or at camp  
 \$30 if you register on or before JUNE 1 (\$15 discount)  
 Includes a Camp Shirt

**About the Camp:**

The State College Assembly of God Football Camp is open to any boy ages 6-13. Boys who are participating in a Fall Football Program are encouraged to attend (you do not have to be a part of our program to attend). In the past 17 years we have had many local college coaches and players visit our camp as special guests to share their love of football and speak with our campers. Local inter-scholastic coaches and players assist our USA Football certified coaching staff in teaching skills. Boys at all skill levels will learn - no prior Football experience is needed. We will be blessed to have One On One Fitness in State College do a planned progressive football exercise program with our players. The first three nights will be dedicated to a team skill (offense, defense, and special teams). Individual skills such as stance, blocking, tackling, running, throwing, catching, kicking, receiving, coverage, etc. will be taught. Both small group and one on one instruction will be highlighted. Wednesday night will feature the QB Challenge, Punt/Pass/Kick and 40 yd dash competitions. Thursday night will be flag football games night. In addition to prayer and devotions, the program will highlight a special guest speaker each night who will share how the skills learned in Football relate to every day life.

**What, When and Where:**

The Camp will be at the State College Assembly of God Football Fields at 2201 University Drive Extension in State College. Monday thru Thursday, July 27-30, from 5:30 p.m. - 8:30 p.m. each day. Show up at 5:00 p.m. - 5:15 p.m. for nightly sign-in.

**2015 SUMMER FOOTBALL CAMP - REGISTRATION AND EMERGENCY MEDICAL INFORMATION**

Age (on 08/01/15) \_\_\_\_\_

\_\_\_\_\_  
 Last name First name Middle initial

Home phone ( ) \_\_\_\_\_ Grade (Fall 2015): \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 month/day/year

Home Address \_\_\_\_\_  
 Street City State Zip

Cell phone ( ) \_\_\_\_\_

Parent's/guardian's names (please print) \_\_\_\_\_

Email (s): \_\_\_\_\_

**Family medical insurance must be used during illness or injury requiring treatment, hospitalization, and/or surgery.** In the event of illness or injury during the course of the Football Summer Camp on July 27-30, I request that measures be instituted without delay as judgment of medical personnel dictates. **In case of emergency,** I understand every effort will be made to contact me. In the event I cannot be reached, I hereby give my permission to the athletic trainer and/or medical professional selected by the adult in charge to secure proper treatment, including emergency room care and/or hospitalization. I also consent to photographs and/or video images of the above listed participant for use within the scope of State College Assembly of God football program advertisements and brochures.

Local Physician to contact in an emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

Personal health / accident insurance carrier \_\_\_\_\_ Policy No. \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

Date Paid \_\_\_\_\_ Cash \$ \_\_\_\_\_ Check \$ \_\_\_\_\_ # \_\_\_\_\_  
(Non-Refundable)