



TROY THOMAS YOUTH CAMPS @ SERVITE HIGH SCHOOL

2010 STATE RUNNER-UP - PAC 5 - TRINITY LEAGUE CHAMPIONS
2009 STATE - PAC 5 - TRINITY LEAGUE CHAMPIONS
6-TIME DEFENDING LEAGUE CHAMPIONS



TROY THOMAS CONDITIONING CAMP

Winter / Spring strength & conditioning opportunity for 5th - 8th grade athletes

JAN 9TH - JUNE 3RD, 2011

MON - WED - THUR

6:30PM - 7:45PM MEET AT THE TRACK

FEE: \$10 PER SESSION (PAY AS YOU GO)



TROY THOMAS YOUTH FOOTBALL CAMP & COACHES / PARENTS CLINIC

A 3-DAY YOUTH FOOTBALL CAMP FOR PLAYERS IN GRADES 1-8
JULY 8TH, 9TH & 10TH, 2011

FRIDAY: 3:30PM - 8:00PM - SATURDAY: 8:00AM - 12:00PM - SUNDAY: 8:00AM - 12:00PM

YOUTH KICKING & SNAPPING CLINIC FRIDAY 8:00PM - 9:00PM

COACHES / PARENTS CLINIC SATURDAY 8:00AM - 9:00AM

SHOES/CLEATS & ATHLETIC SHORTS REQUIRED - WATER PROVIDED - FREE TEE SHIRTS FOR ALL PLAYERS

(714) 774-7575 EXT: 1160 - TTHOMAS@SERVITEHS.ORG

Mail your registration form and a check for \$150 made out to "Troy Thomas Football"

Troy Thomas Youth Camp C/O Servite High School
1952 W. La Palma, Anaheim CA, 92801

CASH ONLY AT DOOR

Tee Shirt Size

Player's Name _____

Parent's Name _____

Youth Large

Player's Address _____

City _____

Zip _____

Adult Small

Home Phone _____

Cell Phone _____

Email Address _____

Adult Medium

Player's School _____

Birth Date _____

Player's Age _____

Adult Large

Adult X-Large

I hereby release, indemnify and hold harmless the Troy Thomas Youth Football Camp and Servite High School, including its trustees, employees, volunteer workers, students, agents & assigns from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my son's participation in this youth camp. Participating in any activity is an acceptance of some risk of injury. Despite precautions, accidents & injuries may occur and injury and/or loss or damage to personal property may occur as a result of participation in this youth camp. Therefore, I assume all risks related to the activities. In case of an emergency and if I cannot be reached, I do hereby authorize a representative of the Troy Thomas Youth Football Camp or Servite High School to consent to any medical treatment or care deemed advisable.

I have read & agree to comply with the above statement. My signature below indicates that I have read, understood & freely signed this agreement, which shall take effect as a sealed instrument. I expressly agree that this agreement shall be construed and enforced in accordance with California laws, & I consent to the jurisdiction of said state. I agree that this waiver & release is intended to be as broad & inclusive as permitted under California laws so that if any portion hereof is held invalid, the balance shall continue in full legal force & effect.

Parent/Guardian Signature _____

Date _____

Emergency Contact Name _____

Emergency Contact Phone _____

***Walkups Welcome Day of Camp. Please Add \$25 for Late Processing . No Refunds**

T-SHIRT AVAILABILITY NOT GUARANTEED FOR REGISTRATIONS RECEIVED AFTER JULY 1ST, 2011