

Elite Football School

Free Youth Football Clinics

The Elite Football School is pleased to offer FREE youth football clinics this year to any area youth between the ages of 5-14. The first free clinic will be offered on May 21st at Gorton Junior High School in Warwick. The second free clinic will be offered on May 28th at Cranston High School West.

On both days the clinic will run from 11:00 a.m. to 1:00 p.m.

To take advantage of this free offer, please complete the waiver on the reverse side and kindly mail back to us by May 14, 2011.

At this clinic, you will receive
FREE INSTRUCTION
in the following areas:

- Offensive and Defensive Skills
- Position Specific Skills
- Speed and Agility Training
- Group Offensive and Defensive Plays
- 7 on 7 Passing Game Situations
- Free Gift



“Challenge yourself like never before!”

Free Youth Football Clinics

PO BOX 114106 North Providence, Rhode Island 02911

Phone: 401.206.0855

Email: info@elitefootballschool.com

Web: elitefootballschool.com

Please Check off the Date of the **FREE** clinic that your child would like to register for:

May 21st @ Gorton Junior High School, Warwick, RI

May 28th @ Cranston High School West, Cranston, RI

When this form is completed you must mail it signed and completed to us by May14th to reserve your space in the clinic

Elite Football School
PO Box 114106
North Providence, RI
02911

RELEASE: I, the undersigned, hereby release and hold harmless Elite Football School, LLC, the City of Warwick, the City of Cranston, their agents and assigns, and all other persons, firms, corporations, associations, including, but not limited to coaches, teachers, volunteers, administrators, volunteers, and parents participating in any camp or clinic activity from any and all liability, claim, cause of action, damage, cost or expense for any mishap or injury to the student/camper named herein resulting from any camp related activity or instruction and from any loss, damage, destruction or theft of any of the student/camper's personal property.

I, THE UNDERSIGNED, HAVE READ THE FOREGOING RELEASE AND FULLY UNDERSTAND AND AGREE TO ALL OF THE TERMS STATED THEREIN.

Parent Signature _____

Witness Signature _____

PERMISSION: I, the undersigned, hereby authorize and allow the Elite Football School, LLC to use the herein named student/camper's name, image, or likeness in any future marketing and/or promotional materials for the camp, including, but not limited to picture and/or video in production, e-mail campaigns or on the Elite Football School website.

MEDICAL RELEASE: I, the undersigned, hereby authorize and give permission for the issuing of any emergency medical treatment to the herein named student/camper in the event of a sudden illness, injury or accident if neither myself nor any parent, guardian or herein named emergency contact can be contacted. Said emergency medical treatment shall be rendered by a licensed emergency medical technician or licensed physician.

I hereby acknowledge and confirm that the herein named student/camper is subject to and covered by the medical insurance company herein listed below.

Child's name _____

Parents name _____

Parent/Guardian phone number _____

Insurance Carrier _____

Parent Signature _____

Signature of Witness _____

Date _____