



# DAVE WHITE'S 2011 YOUTH FOOTBALL CAMP

Please Complete and Return Form with Payment By July 5, 2011

Edison High School Football Boosters  
PO Box 6276 - Huntington Beach, CA 92615

[www.edisonchargerfootball.com](http://www.edisonchargerfootball.com)

**What:** Campers will develop technique and skills for ALL offense and defensive positions, utilizing individual and group instruction. Offensive and defensive techniques will be introduced during this camp. This is not a physical contact or conditioning camp.

**When:** Tuesday July 12 thru Friday July 15, 2011

**Time:** 10am - 12pm

**Who:** Grades 3 thru 8

**Instructors:** Dave White & Staff

**Location:** Edison High School Varsity Practice Field

**Cost:** \$150.00 per Participant (includes T-Shirt)

**Attire:** Athletic Shorts, Socks, & Cleats and bring a Water Bottle

**T-Shirt Size:** Youth Size: S - M - L - XL (circle one)

Adult Size: S - M - L - XL (circle one)

For information please call Dave White (714) 962-3838

or email [info@edisonchargerfootball.com](mailto:info@edisonchargerfootball.com)

**\*WALK UP REGISTRATION AND REGISTRATION AFTER  
July 6, 2011 \$175.00**

Participant Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Birth Date: \_\_\_\_\_

\*Insurance Name \_\_\_\_\_

Policy Number: \_\_\_\_\_

Does Participant have any physical disabilities Yes  No

If answered Yes, please explain on reverse of form

\* Every athlete attending is required to be covered by their own (or parents) insurance and will need to submit the Provider and Policy number in order to participate.

I hereby authorize the staff to act for me to their best judgment in any emergency requiring medical attention. I assume all risks and hazards incidental to such participation in activities. I am covered by my own insurance as set forth above. I hereby release, absolve, indemnify, and agree to hold harmless Edison High School and "Dave White's Football Camps" its directors and staff, and expressly waive any claim which I may otherwise have against them in connection with my participation in training.

\_\_\_\_\_  
Parent / Guardian Signature

\_\_\_\_\_  
Date