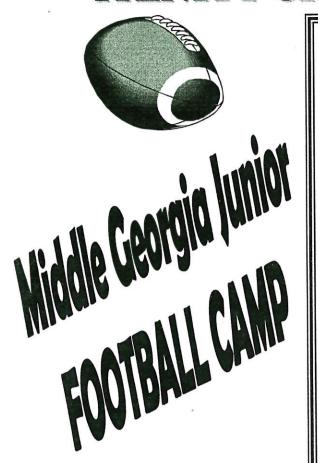


TRINITY CHRISTIAN SCHOOL



- **Year** → Dublin/Laurens County & surrounding area
- **№ Who:** Boys rising K4 to 6th Grade
- **<u>Instruction</u>**: Varsity Football Coach Jimmy Fields will lead instruction
- **When:** June 4th/June 5th/June 7th
- ¥ <u>Time:</u> 6:00pm-8:00pm
- **<u>Objective</u>**: Line & Skill fundamentals Competitive Games & Plenty of Fun
- **> Wear:** Non-Contact no helmet or pads
- **Questions:** Call Coach Fields 678-245-1355 **\$ Payment** > Please make check payable to Coach Fields and please do not combine with other TCS camps



(Please complete this form & return with payment Attention Coach Jimmy Fields TCS, 200 Trinity Road, Dublin GA 31021.)

Junior FOOTBALL Camp

PARENT CONSENT & RELEASE FORM

(DUPLICATE AS NEEDED)

Student's Name	Student's Grad	de this Fall:
Adult Contact Name:	Adult Contact Cell #:	
T-Shirt Size (circle): YS YM YL A	AS AM AL AXL	
I give my permission for(student's name) to participate in the Trinity Christian School Junior Football Camp(June 4—June 7 2018) and do hereby release Trinity Christian School, its administration, its staff, and any camp staff from any and all liability arising out of such participation in this event. The abovenamed student is fit, both physically and otherwise, to participate in all the activities of the camp, except as stated on this form.		
Print Name of Parent/Guardian	Signature of Parent/Guardian	Date