



2019 Bishop Luers Football Camp

What: Bishop Luers football camp for 4th – 12th graders (19-20 school year)

High school campers must be registered students of Bishop Luers High School

When: June 10-13

Time: 4:00-6:30pm

Where: Bishop Luers H.S., 333 E. Paulding Road, Fort Wayne, IN 46816

Cost: \$25.00 per camper

Equipment Needed: Helmet, Shoulder Pads, Cleats, and Practice Jersey

** 4th – 8th graders should see their junior high coach for equipment **

Camp Objectives: Campers will receive basic instruction in football fundamentals, with an emphasis on proper blocking, tackling, receiving, and ball skills. THIS IS A HIGH-INTENSITY CAMP! Each camper will be expected to complete a number of position-specific drills, with great instruction on techniques and how to effectively use them in game situations. There will be **CONTACT** drills throughout the week, closely monitored, to ensure proper tackling and blocking drills are being learned.

Camp Staff: Campers will receive instruction from the Bishop Luers coaching staff, CYO coaches, and former Luers football players. Also on site will be trainers of Bishop Luers High School and Indiana Physical Therapy to ensure the safety of all.

Registration: Complete the attached registration form and return by Thursday, June 6th. Checks and money orders should be made out to: Bishop Luers Football. Mail to Bishop Luers High School, 333 E. Paulding Rd., Ft. Wayne, IN 46816 or drop off to junior high or high school coaches. *Walks up accepted.*



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Registration Form

*Please return this form with a check/cash (\$25/player) to: Bishop Luers Football, 333 E. Paulding Road, Fort Wayne, IN 46816 by **JUNE 10th**. Walk-ups will be accepted, but T-shirt sizes will not be guaranteed. *

of Camper's Name: _____ **Grade (2019-2020):** _____

School Attending (2019-2020): _____

Camper's Name: _____ **Grade (2019-2020):** _____

School Attending (2019-2020): _____

Camper's Name: _____ **Grade (2019-2020):** _____

School Attending (2019-2020): _____

Parent/Guardian Name: _____

Emergency Contact #: _____

T-Shirt (Adult) Size:

S M L XL 2X 3X

Bishop Luers 2019 Summer Camp Waiver & Photo Release Form

Waiver: I hereby give my child (name) _____ permission to take part in the Bishop Luers Football Camp. I will not hold the sponsor of the camp, Indiana Physical Therapy, nor Bishop Luers High School liable for any injuries that might occur.

Photo Release: I hereby grant permission to *Bishop Luers* to use photographs and/or video of my child taken during Bishop Luers Football Camp in publications, news releases, online, and in other communications related to the mission of Bishop Luers High School and the Football Program.

Parent/Guardian signature: _____ Date: _____