

The Muskingum University Football program would like to invite you to participate in a youth football clinic on Saturday, April 16th. The clinic is open to boys currently in the 3rd through 7th grades and is free to all participants. Registration begins at 9:00am at McConagha Stadium on the Muskingum University campus in New Concord, Ohio. Camp will conclude at approximately 12 noon. Each camper will receive a Muskie Football t-shirt. Please wear molded or plastic cleats, or tennis shoes. No metal cleats will be permitted on the turf. **Questions: Call (740) 826-8330, or Email: mlouis@muskingum.edu**

For registration prior to Wednesday, April 13th 2011, Please send the bottom portion of this pamphlet to:

**Muskingum University Youth Football Camp
Attn: Matt Louis, Assistant Football Coach
Muskingum University
163 Stormont Street
New Concord, OH 43762**

NAME: _____ PARENTS: _____

ADDRESS: _____

PHONE (HOME): _____ PHONE (CELL): _____

SCHOOL: _____ CURRENT GRADE: _____

PLEASE CIRCLE A T-SHIRT SIZE: YOUTH: M L XL ADULT: S M L XL

PLEASE DESCRIBE ANY MEDICAL CONDITIONS THAT MAY EXSIST: _____

WAIVER AND RELEASE OF ALL CLAIMS 2011

Assumption of Risk and Agreement to Participate: As a participant in the activities or programs at Muskingum University, I recognize and acknowledge that there are certain risks of physical injury and I agree to assume full risk of any injuries, including death, damages or loss which I or my child may sustain as a result of participation or use of such facilities, activities, or programs. I agree to look to my private physician for medical advice and care, and to notify instructors of any physical limitations I or my child may have or modifications needed. As a participant, I or my child agree(s) to adhere to the rules of the facility and instructional staff or agents.

Waive, Release, & Indemnify: I hereby waive, release and discharge any and all claims I may have or may acquire against Muskingum University, it's officers, agents, servants, and employees as a result of my child's participation in the activities and programs of Muskingum University, and I agree to indemnify and hold harmless Muskingum University, its officers, agents, servants and employees from any and all claims resulting from injuries, damages, and losses, including death, sustained while I or my child are using Muskingum University facilities, except for willful and wanton misconduct by Muskingum University or its authorized personnel. I have read and fully understand the above Waiver and Release of all Claims Form.

Signature of Parents or Guardian

Date

2011 MUSKINGUM UNIVERSITY YOUTH FOOTBALL CLINIC

Grades 3-7
April 16, 2011
McConagha Stadium
9am-Noon
Registration begins at 9am

Presented by
**MUSKINGUM
UNIVERSITY
FOOTBALL**
GET HOOKED!