

# FOSSIL RIDGE FRESHMAN FOOTBALL CAMP 2023

## JULY 24 - 27



**INCOMING 9TH GRADERS**

**5:30 – 7:30 PM**

**COST: \$65 PER ATHLETE**

**REGISTRATION AVAILABLE AT STRENGTH & CONDITION CAMP**

**LOCATION: FOSSIL RIDGE HIGH SCHOOL FOOTBALL FIELD**

**WHAT TO WEAR & BRING: SHORTS, T-SHIRT, CLEATS, OR SNEAKERS**

SEND QUESTIONS TO COACH GROUNDS AT [JOHN.GROUNDS@KELLERISD.NET](mailto:JOHN.GROUNDS@KELLERISD.NET)

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**PLAYER LAST NAME:** \_\_\_\_\_ **PLAYER FIRST NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_ **E-MAIL:** \_\_\_\_\_

**CIRCLE T-SHIRT SIZE:**      **ADULT**      **S**      **M**      **L**      **XL**      **2XL**      **3XL**  
   **YOUTH**      **S**      **M**      **L**

I HEREBY GRANT PERMISSION FOR MY SON/DAUGHTER TO PARTICIPATE IN THE FOSSIL RIDGE FOOTBALL CAMP AND ACKNOWLEDGE THAT HE/SHE IS PHYSICALLY ABLE TO PARTICIPATE IN CAMP ACTIVITIES. I RELEASE KELLER INDEPENDENT SCHOOL DISTRICT, FOSSIL RIDGE FOOTBALL, AND ITS EMPLOYEES FROM ALL CLAIMS FOR INJURIES OR ILLNESS WHICH MAY BE SUSTAINED BY MY SON/DAUGHTER AT THE FOSSIL RIDGE FOOTBALL CAMP.

**PARENT NAME:** \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**MAKE CHECKS OR MONEY ORDERS PAYABLE TO: FOSSIL RIDGE FOOTBALL**