

*Grades in Fall, 2010: Freshman, Sophomore, Junior, Senior*

*Dates: July 1-2, 5-9, 19-23, 26-30*

*Times: 7:00 AM to 10:15 AM and 8:00 AM to 11:15 AM \*\**

*Cost: Pre-registered: \$40.00 Walk-ups: \$45.00*

*Location: Practice Field Just West of Van Dyke Field*

*Coach Olson and the Silver Streak coaching staff will direct the camp. Attendance at the camp will provide all prospective players an opportunity to acclimate themselves to the summer heat and the systems being implemented by the Galesburg High School football staff. All players are strongly encouraged to attend this camp.*

*The camp will stress fundamental aspects of the game for all offensive and defensive positions. Galesburg High School coaching staff will also provide instruction in Galesburg's offense and defense, strength and conditioning. This is a limited contact football camp. Careful attention will be given so that players of similar ages and ability levels are grouped together to provide a great experience for all campers.*

*Each player should report to the location indicated below. Campers should wear shorts, t-shirt, football shoes and tennis shoes to wear in the weight room. All players will receive a Silver Streak Football t-shirt at the end of camp.*

*Please return this form to address below as soon as possible to aid in the planning of the camp.*

*Silver Streak Football  
C/O Coach Olson  
Galesburg High School  
1135 W. Fremont St.  
Galesburg, IL 61401*

*No camper will be turned away for financial reasons, call Coach Olson at GHS for information. Make Checks payable to Silver Streaks Football Camps.*

**\*\*Camp Schedule**

*Line: 7:00 AM- 9:00 AM- field 9:15- 10:15-weights*

*Backs: 8:00-9:00 AM-weights 9:15- 11:15 field*

**GALESBURG FOOTBALL CAMP  
REGISTRATION FORM 2010**

**NAME** \_\_\_\_\_

**Home address** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Height** \_\_\_\_\_ **Weight** \_\_\_\_\_

**Year in School for Fall 2010** \_\_\_\_\_

**Circle Your Off. Position- line, receiver, QB, RB**

**Circle Your Def. Position- line, linebacker, defensive back**

**T-Shirt Size:**

\_\_\_\_ medium \_\_\_\_ large \_\_\_\_ x-large \_\_\_\_ xx-large \_\_\_\_ xxx-large

**A physical examination is not required for this camp but is required is required by the start of practice on August 11<sup>th</sup>. It is a good idea to get this taken care of now. GHS physical night is Monday, June 7, 2010.**

**A parent or guardian should sign the waiver below:**

*My son has permission to attend the Galesburg High School football camp. I have no knowledge of any physical impairment that would affect or be affected by my son's participation in the camp. I authorize the camp staff to act for me to obtain medical treatment should an emergency arise. I specifically waive and give up and release the Galesburg football staff from liability for any claim for damages, which my son or I may for injuries that he may sustain at the Galesburg High School football camp.*

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

***GALESBURG HIGH  
SCHOOL FOOTBALL  
CAMP- 2010***



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