



# 2017 BLUE RAIDER FOOTBALL CAMP

## Camp Dates

**JUNE 12th, 13th, 14th, & 15th MON-THURS**

**Grades 1 - 6 @ 8 - 10 am**

**Grades 7 - 9 @ 10:30 am - 12:30 pm**

**\$50** per participant

*Make Checks Payable To:*

**MIKE GLAZE**

## Location

**E. Don Brown Activity Center**

1601 Brown Trail  
Hurst, Texas 76054

The indoor facility can be accessed via the south drive, across from the softball field.

## How to Register

**Register on-site on the first day of camp or by mailing your completed registration form and payment to:**

Blue Raider Football Camp  
Attention : Chris Eldridge

1601 Brown Trail  
Hurst, Texas 76054

Camp Questions:

**Chris Eldridge** - Camp Director      ChristopherEldridge@hebisd.edu

**Mike Glaze** - Head Football Coach      MikeGlaze@hebisd.edu

817-399-3238

## PARENTAL CONSENT

**I, the undersigned, give my permission for the participant(s) named on this form to participate in the Blue Raider Football Camp. I hereby agree to waive all claims and hold harmless the school district, its officers and employees from all claims arising from their reliance on this consent form.**

\_\_\_\_\_ Date: \_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Guardian Printed Name

\_\_\_\_\_  
Guardian Phone Number

# REGISTRATION INFORMATION

Participant #1

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

(2017-18) Grade \_\_\_\_\_

Shirt Size (circle one):

YM YL AS AM AL AXL A2XL

Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Participant #2

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

(2017-18) Grade \_\_\_\_\_

Shirt Size (circle one):

YM YL AS AM AL AXL A2XL