



# Pirate Football Camp

*Football Skills and Speed Development*

Ventura College Football is proud to announce the 4<sup>th</sup> Annual Youth Summer Camp!

## 2010 Camp Dates

Week #1: July 19 - 22 (Mon. - Thur.)

Week #2: July 26 - 29 (Mon. - Thur.)

All Sessions Meet 9:00 am - 12:00 pm

Check-in is 8:00 am behind Small Gymnasium.

## Camp Eligibility

All football players ages 7-14 are eligible for the camp.

## Camp Costs

Advance: \$100

Family Discount\*: \$85 each

Day of Camp: \$110

Multi-Week Discount\*\*: \$85 per week

\* Two or more campers from the same family. Registrations must be mailed together.

\*\* One Camper for multiple weeks of camp.

Call VC Community Education Office, 654-6459 for Discount Registration

### Send Registration Form and Payment to:

Pirate Football Camp  
c/o VC Community Education  
71 Day Road  
Ventura, CA 93003

Contact/Questions:  
Steve Mooshagian, Head Coach  
(805) 654.6400  
ext. 3211

[www.VCsportscamps.com](http://www.VCsportscamps.com)

# Pirate Football Camp Registration Form

## Camper Info:

Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_

## Contact Info:

Home Phone: \_\_\_\_\_ Day Phone: \_\_\_\_\_  
Parent(s) Name: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
(other than parent)

## Medical Info:

Health Insurance: \_\_\_\_\_ Policy #: \_\_\_\_\_  
Conditions/Allergies: \_\_\_\_\_  
\_\_\_\_\_

## Camp Session:

WEEK #1 (July 19 – July 22) \_\_\_\_\_

WEEK #2 (July 26 – July 29) \_\_\_\_\_

## Camper t-shirt size:

YS \_\_\_\_\_ YM \_\_\_\_\_ YL \_\_\_\_\_ YXL \_\_\_\_\_ AS \_\_\_\_\_ AM \_\_\_\_\_ AL \_\_\_\_\_

## Payment:

Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Amount Enclosed: \_\_\_\_\_  
Online Registration Available at [www.VCSportsCamps.com](http://www.VCSportsCamps.com)

**Please make checks payable to  
"VC Football Camp"**

## Consent to Treatment of Minor:

In the event of sudden illness, accident or injury which may occur while said minor is engaged in an activity supervised by the Ventura College Football Camp and their representatives, agents or assignees, when neither parents, or designated family physician can be contacted, I hereby give my consent pursuant to California Family Code 6910 for emergency treatment as shall be necessary under the circumstances by any physician licensed under laws of the State of California.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Family Physician and Phone