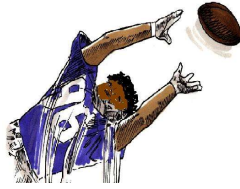


Speed Camp USA

(936) 273-9821 phone (936) 273-9821 (fax)



\$125

16th Annual Competitive League

7 on 7 Football

6th - 8th grades

Registration deadline April 20th



Includes 7 on 7 gameshirt, **Gamebreaker** headgear*, six 45-minute games & practices plus City tournament play.

Games will be played on **Thursday** evening's at Lakeview High School starting @ 5 pm

With concussion concerns becoming more prevalent, we've decided to require all players to wear protective headgear*. It is a necessary step in keeping our players safe. Visit Gamebreaker.com for more info.

*** (Last season's players may choose to wear their Gamebreaker headgear if desired @ a price of \$100)**

May 2nd, 9th & 16th Regular Season

- ☞ Optimal team size 10-12 players per team.
- ☞ High school Juniors & Seniors will coach the 7th & 8th grade teams. 7th & 8th grade teams determined by MS coaches.
- ☞ Dad's allowed to coach 6th grade teams ONLY.
- ☞ Two HS official's calling each game. **Mouthpieces & Headgear REQUIRED**
- ☞ Once per week practices determined by coach, after daily school activities.

May 23rd, City Tournament

- ☞ Two game guarantee.
- ☞ Championship shirts awarded to division winners.

NEW May 25th, Regional Tournament in **San Antonio** ★

- ☞ Three game guarantee; requires \$30/player for qualifying teams only

Important Dates:

Monday, Apr 22nd – should hear from your coach regarding practice(s)

Monday, April 29th – game schedule & rules available online

Thursday, May 2nd - GAMES start (between 5:00pm – 8:00pm)

Price includes **Gamebreaker** headgear



Position (circle): **QB** Rec RB LB DB
 Gamebreaker headgear (circle): S(19.5-20.5") M(21-22") L(22.5-23")
 Dri-Fit t-shirt size (circle): Y AS AM AL AXL
 Name: _____ Grade: _____
 Address: _____ City: _____ Zip: _____
 School attending: _____
 Phone#: _____ Parents Name: _____
 Insurance Co: _____ Emergency#: _____
 Email: _____
 (for confirmation purposes; exclusive to Speed Camp USA)

RELEASE OF LIABILITY (waiver)

I give permission for _____ to participate in this 2019 event conducted by Speed Camp USA. I understand that I must provide insurance coverage for my child and acknowledge that Speed Camp USA and any agent involved with Speed Camp USA shall be held harmless in the event of injury. I further understand that the school insurance does not cover this event.

SIGNATURE FOR RELEASE OF LIABILITY

Parent _____ Date _____ / _____ / _____

Credit Card Information:

Check One: MasterCard Visa Discover
 Card # _____ - _____ - _____ - _____
 Amt \$ _____ Exp(mo./yr.) ____ / ____
 CVV# _____ ZipCode _____
 Auth. Signature _____

Check Information:

Check# _____ Amt \$ _____
 Make payable to: **Speed Camp USA**

NO refunds after April 20th

Mail To: **Speed Camp USA**

P.O. Box 8063, The Woodlands, TX 77387

Register by Fax, Online or by Mail

www.SpeedCampUSA.com

www.SpeedCampUSA.net