

DISCOUNTS

Sibling-siblings attending camp will receive a family discount of \$10 off.

Bring a Friend-Have a friend register who has never attended this camp before and you both receive a \$10 off discount. You must send in completed registrations together.

RFL-The Rockville Football league will again provide up to \$100 in camp fees for children who have previously played or are registered to play in the RFL for the 2009 Season. Documentation of Public assistance must be provided. Funds are limited and will be granted on a first come first serve basis. Call Jen at 301-765-7979 for more information and to apply.

Participants must provide verification of any of the following: Award letter from Maryland Dept. of HR/Montgomery Co., Dept. of Social Services verifying eligibility for one of the following: Temporary Cash Assistance (TCA), Food Stamps, Medical Assistance, Transitional Emergency Medical and Housing Assistance (TEMHA).

The letter indicates eligibility period and names of household members receiving benefits. (We do not accept Medicaid cards or Care for Kids).

Proof participant resides in a shelter - Letter from shelter dated within a month of application and, if applicable, listing dependents living at shelter.

Proof of Rental Assistance - Public Housing, HUD Section 8 Housing, HOC. This must be a current document from the agency providing assistance which names the eligible tenants. (MPDU not accepted for applicants purchasing a home).

Supplemental Security Income - Document must be dated within one year of application.

RAMS FOURTH ANNUAL SUMMER FOOTBALL CAMP

2009



July 6- 10, 2009

Rockville High School
2100 Baltimore Road
Rockville, MD 20851

8 a.m. – 1:00 p.m.

***For students (grades 3-8)
interested in learning the
game of football.***

CAMP OBJECTIVE

The Rams Football Camp is designed to instruct each athlete in the fundamentals of football. This is a non-contact camp. We want your child to have fun while learning skills, drills, and techniques to help them excel in the game.

The camp staff will promote a better understanding of the game of football through commitment, dedication, and hard work. This experience will leave participants with new friends and a greater appreciation for the game of football.

REGISTRATION

COST: \$125 before June 1
\$150 June 2-July 5
\$150 Walk-Up Registration

Make payment in full with application, or send in a \$50 deposit—balance due on first day of camp. All checks should be made payable to **RHS Athletics**.

Please send your payment and completed application to:

Coach Kevin Bernot
Rams Football Camp
c/o Rockville High School
2100 Baltimore Road
Rockville, MD 20851

FOR MORE INFO

Call (301) 517-5584 or (301) 370-7062
Or
E-Mail: kbernot@aol.com

FEATURES

Daily instruction from RHS coaching staff and players which emphasizes the following fundamentals of the game:

- Running
- Pass Routes
- Pursuit
- Ball Handling
- Pass Defense
- Run Defense
- Passing
- Alignment
- Punting
- Kicking
- Snapping
- Individual Techniques by Position

This year the camp also features:

- Punt, Pass and Kick
- 7 on 7 Games
- Combine Skills Competition
- Camp T-Shirt and Shorts
- Individual Trophies/Awards
- Players Grouped by Age/Ability
- Concession Stand during break and after Camp daily
- Mid-Morning Snack

DAILY SCHEDULE

Monday – Friday
8:00 a.m. – 1:00 p.m.
each day

Register before June 1,
2009 and get your last name
printed on the back of your
t-shirt!!

APPLICATION

Name: _____

Address: _____

City: _____ State: _____

Zip: _____ Phone: _____

Grade (Fall 2008) _____

T-Shirt Size: Adult S M L XL XXL
(Circle One Size)

Shorts Size: Youth S M L XL
Adult S M L XL XXL
(Circle One Size)

- Deposit Enclosed: _____
- Payment Enclosed: _____ Check# _____
- Sibling or Bring a Friend (circle one)
Discount: _____
(One discount per family/player allowed)

PARENTAL PERMISSION

I hereby authorize and consent to my child's participation in the **2009 Rams Youth Football Camp**. I assume the risk of injury to my child that may occur in an athletic activity. I authorize the staff to act for me in their best judgment in any situation requiring medical attention.
I here-by waive and release the camp staff for any and all liability for injuries incurred. I have no knowledge of any physical impairment or condition that would be affected by the named player's participation in this activity.

Signature: _____

Date: _____

Relationship to Applicant:

E-Mail: _____

Emergency Phone Numbers:

