



Do you want to get a jump on your competition and improve your football skills?

**If so, then the Patriot Football Camp is the right choice for you!**

The four night non-contact camp will give you a chance to work with and against many local high school athletes. You'll be able to see first hand where you stand and what it will take for you to dominate your position.

**The Patriot Football Camp offers you some of the finest coaches on the South Shore.**

At our camp, the players will receive individual instruction in all aspects of football, including: offensive individual instruction, defensive individual instruction, line play, pass game, and run game.

**Get a head start on your competition!!!**

**When:** Monday August 7th through Thursday August 10th

**Where:** Duxbury High School Football Field  
Monday registration 3:00pm - 4:00pm

**Time:** 4:00 - 7:00pm

**Grades:** 9 - 12 high school players and 8th grade youth teams (as of 9/1/2017)

**Gear:** Helmets, mouth piece, shoulder pads, athletic supporter, shorts, and cleats

**Cost:** \$125 per player (Checks payable to Patriot Football Camp)

**Directions:** Take exit 11 off Route 3. Take Route 14 E (West Street), at the Blinking light, bear right. Go through the lights, Duxbury High School Football Field is located 1 mile on the left, 130 St. George Street. Please use the side parking lot.

**Director:** Dave Maimaron (617)669-1254

**\*\*\* CAMP ABIDES BY ALL MIAA RULES & REGULATIONS \*\*\***

**Patriot Football Camp Liability Release Agreement**

Please Print

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Grade \_\_\_\_\_ Phone \_\_\_\_\_  
 School \_\_\_\_\_ T-Shirt Size: Circle one M L XL XXL

**RELEASE AND INDEMNITY AGREEMENT**

I sign this liability release agreement both individually and as parent/guardian with legal authority and responsibility for the minor child names on this form. I certify that the child is in good physical condition. In case of personal injury during, before or after participation in the program, I hereby consent to treatment for those children by a medical doctor or member of Patriot Football Camp.

On behalf of myself, any minor children named on this form and our heirs, assigns, personal representatives and next of kin,

(1) I acknowledge that participation in physical exercise under the direction of Patriot Football Camp in their various forms carries with it inherent risks, including but not limited to, the risk of personal injury, death, or property damage and I voluntarily assume those risks. I know that the risks also include but are not limited to unusual physical changes, including but not limited to: abnormal blood pressure; fainting; disorders in heartbeat; heart attack; and, in rare instances, death.

(2) I release Patriot Football Camp, its officers agents, representatives, affiliated companies and/or employees, with respect to any and all liability, loss, damage, costs, claims, and/or causes of action, including but not limited to injury, disability, death, or loss or damage to person or property related in any way to participation in Patriot Football Camp by myself or any child listed on this form, whether arising from the negligence of Patriot Football Camp, its officers, agents, representatives, affiliated companies and/or employees.

(3) I further understand that the participation in physical exercise involves the risk of serious injury to all parts of the participants' body.

(4) I further agree that this agreement will be governed by Massachusetts law.

I further agree to defend, indemnify, and hold harmless Patriot Football Camp, its officers, agents, representatives, affiliated companies and/or employees from any and all liabilities incident to the program of physical exercise, even if arising from the negligence of Patriot Football Camp, its officers, agents, representatives, affiliated companies, and/or employees, to the fullest extent permitted by law.

I/WE HAVE READ THE ABOVE RELEASE, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE NOT CHANGED IT ORALLY, AND SIGN IT VOLUNTARILY.

Participant's Name (Please print) \_\_\_\_\_ Date \_\_\_\_\_  
 Participant's Signature (if over 18 years of age) \_\_\_\_\_  
 Parent's/Guardian's Signature & Emergency Phone \_\_\_\_\_  
 Name and Date (Please Print) \_\_\_\_\_  
 (If participant is under 18 years of age)

**PLEASE SUBMIT THIS FORM AND PAYMENT TO YOUR HEAD COACH**