

## Winter League



7 on 7 Football

Friday Nights (2 Games/ea.)
Games start @ 6pm

Location: SCFL-Gullo Park 1122 Pruitt Rd #½, The Woodlands, TX 77380

League Play – January 12th, 19th, 26th, February 2nd League Tournament – February 9th

- 2 officials calling each game
- Bring your own team & shirts
- Softshell helmet & mouthpiece
   <u>REQUIRED!</u> Parents are
   responsible for providing helmet.
   <u>Gamebreaker</u> recommended (rentals avail @ \$10/day)

Coaches will contact players/parents regarding practice times

2nd & 3rd Grade - 4th & 5th Grade - 6th Grade

For more information call Speed Camp USA at (936) 266-0070 (phone or fax)

| Position (circle): Q  | 3 Rec | RB     | LB     | DB     |  |
|---|-------|--------|--------|--------|--|
| Name:   |       |        |        | Grade: |  |
| Address:  |       | City   | y:     | Zip:   |  |
| Phone#:   |       | Parent | s Nam  | ne:    |  |
| Insurance Co:   |       | _ Scho | ool/Co | ach:   |  |
| Email:  |       |        |        |        |  |
| (for confirmation purposes; exclusive to Speed Camp USA)  |       |        |        |        |  |
| RELEASE OF LIABILITY (waiver)  I give permission forto  |       |        |        |        |  |
| participate in the 2024 event(s) conducted by Speed Camp USA & SCFL. I understand that I must provide insurance coverage for my child and acknowledge that  |       |        |        |        |  |
| Speed Camp USA & SCFL and any agent involved with Speed Camp USA & SCFL 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  |       |        |        |        |  |
| Parent Date/  |       |        |        |        |  |
|   |       |        |        |        |  |

| Credit Card Information:                |   |  |  |  |  |
|---|---|--|--|--|--|
| Check One:   MasterCard  Visa  Discover |   |  |  |  |  |
| *                                       | insactions will have a \$2.95 processing fee) |  |  |  |  |
| Card #                                  | - <del>-</del>                                |  |  |  |  |
|   | Exp(mo./yr.)/                                 |  |  |  |  |
| CVV#                                    | ZipCode                                       |  |  |  |  |
| Auth. Signature                         |   |  |  |  |  |
| Check Information:                      |   |  |  |  |  |
| Check#                                  | Amt \$  |  |  |  |  |
| Make payable to: Speed Camp USA         |   |  |  |  |  |
| NO                                      |   |  |  |  |  |

## NO refunds after January 8th

Mail To: **Speed Camp USA**P.O. Box 8063, The Woodlands, TX 77387
Register by Mail or Fax or Online @
www.SpeedCampUSA.com