



SYC YOUTH FOOTBALL CAMP

www.sycva.com/football

Get ready for the 2009 football season!!

Ages 7-16 (age as of October 1, 2009)



Dates:

Session 1 (6-8 pm Monday – Thursday)	Session 2 (6-8 pm Monday – Thursday)
July 20-23 Irving Middle School	August 3-6 Washington Irving MS - updated
8100 Old Keene Mill Road	8100 Old Keene Mill Road

Hours & Fees: Monday - Thursday 6:00 – 8:00 pm \$80 (\$70 for each additional child)
Registration fee includes a camp T-shirt for those who register at least 2 weeks prior to camp start date.

Staff: Experienced Head and Assistant SYC youth coaches with a variety of specialty skills.

Refunds: A \$10.00 administrative fee will be charged for refunds requested at least 14 days prior to camp start date, less than 14 days prior to camp start date a \$20.00 administrative fee will be charged. After camp start date, no refunds will be given.

Schedule: SYC Youth Football Camp is a non-contact football camp designed to improve a child’s beginning, intermediate or advanced skill level. Get ready for the season or be introduced to youth football in a non-contact camp emphasizing skill learning in small groups formed by age, size and experience, all in a fun setting. Players will learn the basic fundamental skills of blocking, tackling, throwing, receiving and running and teamwork.

Preparation: Campers should wear t-shirts, shorts, cleats or tennis shoes. Water bottles should be brought to camp each day. Parents will receive a camp confirmation soon after registering.

For more information or questions contact Stevie Brown at FOMshow@aol.com.

Visit www.sycva.com/football for all the latest on the football program.

(Please cut along dotted line)

Place in X in the week(s) you child will be attending			
<input type="checkbox"/>	July 20-23 Irving Middle School	<input type="checkbox"/>	August 3-6 Irving Middle School
	8100 Old Keene Mill Road		8100 Old Keene Mill Road

Fee is \$80.00 per session per child (\$70 for each additional child)

Two ways to register, by Check or Credit Card (MasterCard, Visa or Discover)	
Make checks payable to: SYC Return to: SYC Football Camp PO Box 2143 Springfield, VA 22152	Credit Card Payment Type of Card: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover Name on Card: _____ Card # _____ Expiration Date: _____ Amount: _____

CAMPER'S NAME:		AGE AS OF 10/1/09:	PARENTS NAME:	
STREET ADDRESS:				
CITY & STATE:	ZIP:	T-SHIRT SIZE: Circle size YS YM YL AS AM AL AXL		EMAIL:
HOME #	WORK #		CELL #	
EMER CONTACT NAME:	PHONE #		RELATIONSHIP TO CAMPER:	
PARENT'S SIGNATURE:		DATE:		