



## Navy & Green Skill Camp



We are excited to offer our 1st Annual Navy and Green Skill Camp! This is going to be an outstanding opportunity to work with all skill kids within the Marquette Program grades 5<sup>th</sup> -12<sup>th</sup> in one setting. These kids will be working with our QB's who will be finishing up a 3 day camp. We are excited for another great day of football development. ALL IN

Thanks,

Matt Klein  
Head Football Coach  
Marquette High School  
573-280-0999  
[marquettehsfootball@gmail.com](mailto:marquettehsfootball@gmail.com)



Location: Marquette High School

Grades: Entering 5<sup>th</sup>-12<sup>th</sup> Grade

Dates and Time:

- Saturday, June 20<sup>th</sup>
  - ALL Skill Positions: WR, RB, and TE's
  - 8:00am-11:00am
  - Working with the Quarterbacks within the Marquette Program for small group instruction and development



**ALL IN**





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## 2015 Navy and Green Skill Camp Required Form

THE DOCUMENT IS TO INSURE THAT ALL PARTICIPANTS KNOW AND UNDERSTAND THAT ON June 20<sup>th</sup>, 2015 COACH MATT KLEIN AND SJM RESOURCES WILL BE HOSTING A 1 DAY SKILL CAMP. PLAYER CONTACT WILL BE LIMITED AND CONTROLLED. OUR STAFF WILL MAKE EVERY EFFORT TO INSURE THE SAFETY OF ALL PARTICIPANTS. YOUR SIGNATURE BELOW WILL ACKNOWLEDGE THE FACT THAT ALL PARTIES AND PARITICIPANTS ARE AWARE OF THE NATURE OF THE CAMP.

**Grade this fall:** \_\_\_\_\_

**Player's Name:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_

**Emergency Phone:** \_\_\_\_\_

### RELEASE, INDEMNITY AGREEMENT, AND MEDICAL AUTHORIZATION

I/WE BEING THE PARENTS AND/OR LEGAL GUARDIAN OF \_\_\_\_\_  
AUTHORIZE SJM RESOURCES LLC AND ITS EMPLOYEES AND AGENTS PERMISSION TO REQUEST MEDICAL TREATMENT OR CARE AS NECESSARY TO INSURE THE WELL-BEING OF OUR/MY SON. FURTHER, I CLAIM THAT OUR/MY SON IS FOUND FIT FOR ALL PHYSICAL ENDEAVORS AND HAS HAD A VALID PHYSICAL IN THE PAST YEAR AS WELL AS BEING COVERED BY VALID MEDICAL INSURANCE. I HEREBY RELEASE SJM RESOURCES LLC AND ALL ITS EMPLOYEES AND AGENTS FROM ALL CLAIMS ON ACCOUNT OF ANY INJURIES WHICH MAY BE SUSTAINED BY OUR/MY SON WHILE PARTICIPATING IN THE FOOTBALL CAMP AND ANY FUTURE CLAIMS HEREAFTER PRESENTED BY OUR/MY SON RESULT OF ANY SUCH INJURIES.

Parent Signature: \_\_\_\_\_ DATE: \_\_\_\_\_

Cost of Camp: \$25

Checks Payable To: "SJM RESOURCES"  
(NOTE: This is not a Rockwood School District Sponsored Camp)

**Send To: Marquette High School  
ATTN: Matt Klein  
2351 Clarkson Road  
Chesterfield, MO 63017**



**ALL IN**

