

# Capital City Football Camp 2019

**Capital City Football Camp is open to boys and girls entering grades 6-8.** The purpose

and benefit of this camp is designed to master the execution of fundamental football techniques. Athletes will participate in individualized technique and drill sessions. This will help the athletes improve their skill, ability, and confidence in a team setting. The camp will provide the opportunity to meet new friends in an atmosphere of friendly athletic competition. We hope you'll join us this summer for a great football learning experience.

**July 9<sup>th</sup> - July 11<sup>th</sup>, 2019 – Century High School**

## Camp Fee

**The cost of the camp is \$60.00 by July 5th.** This fee includes: All instruction, snacks, and Capital City Football T-shirt. Make checks payable to Ron Wingenbach (camp director). If two campers attend from the same family, the second camper will be charged \$50.00.

## Location

The camp will be conducted at Bismarck Century High School, 1000 E Century Ave, Bismarck, ND 58503



## What to Bring to Camp

Those attending the camp need to bring tennis shoes or cleats, shorts, & t-shirt. Water will be provided at all times.

## Keys to the Camp

- Grouped by age & position
- Emphasis placed on skill development
- Individual Instruction by position group
- Group and team instruction



## **For further information/questions,**

contact Ron Wingenbach at  
701.426.1779 or email at:

[ron\\_wingenbach@bismarckschools.org](mailto:ron_wingenbach@bismarckschools.org)

REGISTRATION FORM for **Capital City Football Camp 2019**, Grades 6-8

9:00-11:30 AM, Tuesday-Thursday; July 9-11th.

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_

Grade Entering Fall of 2019 \_\_\_\_\_

T-Shirt Size (Adult) \_\_\_\_\_ Position: Offense \_\_\_\_\_ Defense \_\_\_\_\_

In case of emergency contact:

Name \_\_\_\_\_ Home # \_\_\_\_\_

Work # \_\_\_\_\_

I hereby give my approval for my child to participate in Capital City Football Camp. I hereby authorize the directors of Capital City Football Camp and all instructors to act for me according to their best judgement in any emergency requiring medical attention. I hereby waive and release the camp from any and all liability for an injury while at camp. I certify that my son is medically fit to participate in our program. I understand that Capital City Football Camp Director, Ron Wingenbach, and all instructors will not be responsible for injury or loss of property while the athlete is attending camp. I also understand that each camper is responsible for his own medical insurance and expenses.

Date: \_\_\_\_\_

Parent/Guardian \_\_\_\_\_

To be accepted in our camp, include a check payable to Ron Wingenbach (Camp Director). Fill in the above and return to:

**Ron Wingenbach**

**Century High School - FB**

**1000 East Century Ave.**

**Bismarck, ND 58503**