



## DD SCOTS FOOTBALL

### SCOTS FOOTBALL YOUTH CAMP 2022

TO: Football Players Entering Grades 3-8

From: Cal Szieber, Head Football Coach, David Douglas High School

The Scots Football Camp will run from 10:00-12:00, Monday-Thursday, August 1-4, in the high school stadium. The Cost This Year is \$15. Every player who signs up will get a T-shirt and instruction from High School and Middle School Coaches and High School players, along with some special guests who are DD graduates who have played in the NFL! The Camp Director is Jay Williams, Assistant High School Football Coach. We will work on fundamentals, team play, system knowledge, conditioning and building enthusiasm.

This is a great time for 3rd-gth graders to increase their confidence, self-esteem and skill level in the game of football. Please complete the registration form on the second page entirely and have a parent/guardian signature for permission. **Checks can be made out to David Douglas High School Football Trust.** The permission form and \$15 Fee can be mailed to the high school at David Douglas High School, 1001 SE 135th Ave., Portland, OR 97233, % Cal Szieber, Head FB Coach, or brought to us at the time of registration on the first day. We can only take Cash or Checks and banks will charge a fee if a check is returned. Please arrive by 9:45 AM at the gate for registration. Go Scots and Future Scots!

Cal Szieber,  
Head Football Coach  
David Douglas High School  
cal\_szieber@ddsd40.org

**Scots Football Camp Participation Form**  
**DAVID DOUGLAS SCHOOL DISTRICT NO. 40**  
**1500 SE 130th AVENUE, PORTLAND, OR. 97233**  
**SUMMER YOUTH CAMP**  
**Verification of Insurance**

I give permission for (please print name), \_\_\_\_\_ to participate in a controlled football camp to be held August 9-12 at David Douglas High School. As a parent/guardian, I/we understand the district does not provide medical insurance coverage. I understand any expenses as a result of accidents, medical, hospital, ambulance service, or emergency services incurred on behalf of a participant will not be covered by the David Douglas School District. I/we understand further that there may be expenses in addition to what the insurance will pay, and I/we acknowledge my/our responsibility for those expense.

\_\_\_\_\_ (Date) \_\_\_\_\_ Signature of Parent/Guardian

Participant's Name \_\_\_\_\_

Grade (2022-23 school year) 3rd 4th 5th 6th 7th 8th

T-SHIRT SIZE (Please circle): SM M L XL XXL

Telephone number in case of emergency during camp (\_\_\_\_) \_\_\_\_\_

Address (include zip code) \_\_\_\_\_  
\_\_\_\_\_