

# Lakeview Spartans



## High School Football Camp

Grades 9<sup>th</sup> – 12<sup>th</sup>

July 29th -  
July 31st

### Camp Highlights

- Air Force Football
- Techniques, Systems, & Competition
- Pizza Party!
- T-Shirt
- Work with the Coaches of the 2019 Lakeview Spartans

### Lakeview Spartan 2019 Football Schedule

Date	Teams	Home/Away
8/29/19	Lakeview vs. Niles	Away
9/6/19	Lakeview vs. Mattawan	Home
9/13/19	Lakeview vs. BC Central	Away
9/20/19	Lakeview vs. Gull Lake	Home
9/27/19	Lakeview vs K Central	Away
10/4/19	Lakeview vs. Lakeshore	Home
10/11/19	Lakeview vs. St. Joe	Away
10/18/19	Lakeview vs. Loy Norrix	Home
10/25/19	Lakeview vs. Harper Creek	Home

All Game Times are at 7:00 P.M.

Dear Athletes and Parents:

The Lakeview Spartan Coaching Staff would like to welcome you to our annual High School Football Camp. The camp is designed to create an excitement for the game of football and promote the program to the team, families, and community. Our objective is to teach the fundamentals of the game, introduce our system and familiarize the Junior High and High School levels techniques we will employ. The staff is eagerly awaiting the opportunity to work with your young athletes, while also getting an idea at what the future looks like at Lakeview. It is my hope that you will join us at the camp and learn our systems. I would like to take this time and thank you for your interest and consideration.

Sincerely,  
Coach Diorio & Staff

## Camp Purpose

- Learn the fundamentals of football.
- Give our student-athletes the opportunity to work with high school coaches.
- Instill the desire it takes to become a successful player and better person.
- We want to promote leadership and responsibility to our High School athletes.

## Camp Objectives

1. Improve individual and team football skills in the following areas:
  - Speed and Agility drills
  - Blocking & Tackling
  - Passing, & Receiving
  - Pass Coverage & Rush
  - Offense & Defense systems
2. Learn Our System!!!

## **Spartan Camp Registration**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Grade (in Sept.) \_\_\_\_\_  
Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_

### **T- Shirt Sizes**

S M L XL XXL

Please return application and check as soon as possible.

*Check should be payable to the Lakeview Schools:*

Coach Diorio Lakeview High School  
15060 S. Helmer Road Battle Creek, MI. 49015

Cost - \$35 (payable to Lakeview High School)

Dates – July 29th - July 31st

Time – 9:00 A.M.-1:00 P.M.

Where – Lakeview Athletic Fields

Grades – 9<sup>th</sup> – 12<sup>th</sup> (as of September 2019)

### **Waiver**

The following waiver release form must be completed in order to participate in the football camp.

The undersigned, in partial consideration for the participation of his/her child in the Lakeview Football Camp, does hereby waive, release, and forever discharge the Lakeview Football Camp and their agents and employees for any and all injury or damages sustained by the participant or his parents, legal guardians, representatives, heirs or successors arising from or out of the same participation. In addition, the undersigned does hereby agree to indemnify and save harmless the Lakeview Football Camp and their agents and employees from any claims or demands whatsoever for loss, cost, injury, or damage arising from the participation of his/her child/children in the above-mentioned activity, including but not limited to negligence of said child/children.

Student: \_\_\_\_\_

Parent: \_\_\_\_\_



## HOW TO REGISTER FOR CAMP

### By Mail:

Lakeview High School  
Attn: Beckie Reed  
15060 Helmer Road South  
Battle Creek, MI 49015

### Fax:

Attention: Beckie Reed  
(269) 565-3717

### Pay Online:

Through PaySchools at  
[www.lakeviewspartans.org](http://www.lakeviewspartans.org)  
(See instructions under  
Payment Procedures to the left)

Sorry, we can no longer accept  
phone registrations!

### REGISTRATION PROCEDURES

- Register & pay: by mail, or pay online at PaySchools and then mail or fax the forms.
- Each participant must have a separate registration and insurance form; these forms may be reproduced for additional registrants.
- Early registration is advised. Some camps have limited space and fill quickly, and not enough participants by the registration deadline may result in the cancellation of the camp.
- Registrations are taken in the order they are received.
- Pre-registration is required for all camps.
- Payment must accompany registration and insurance forms.
- **Confirmation of your registration will not be sent. You will be notified only if the camp is full or cancelled.**

### PAYMENT PROCEDURES

- Camp fees may be paid by cash, check credit card, or online through PaySchools.
- Payment or credit card information must accompany registration.
- Make checks payable to: Lakeview High School. If paying by Visa/MasterCard or Discover write account number, expiration date, and 3- digit verification number on form and sign form.
- **Instructions for paying through PaySchools:**  
Go to [www.lakeviewspartans.org](http://www.lakeviewspartans.org), then to the High School page. On the left side of the high school page, click on "PaySchools", then "Sports Camps", select appropriate camp. **Paying online through PaySchools only, DOES NOT register your child-you must complete and return the registration and signed waiver forms to us by the deadline to avoid a \$10.00 late fee.**
- **Please include a \$10.00 late registration fee if registering or paying after the deadline of your child's desired camp. Registrations must be postmarked on or before the camp deadline to avoid the late fee.**

### REFUND POLICY

- Full refunds are paid if the camp is cancelled due to insufficient enrollment.
- If you cancel five or more working days prior to the first day of camp, your money will be refunded minus a \$5.00 processing fee.
- If you cancel less than 5 working days prior to the first day of camp, your money will be refunded, minus a \$5.00 processing fee and any direct costs incurred (example: camp insurance).
- No refunds will be paid after a camp begins.
- Please allow 2-4 weeks processing time for all refunds.

### WEATHER RELATED INFORMATION

Weather related cancellations will be posted to our website and sent to the local radio and television stations. Please talk to your camp coach regarding make-ups for the cancellation.

**For summer camps held outdoors:** Cancellations due to non-severe weather is at the discretion of the coach. Please check with the coach on the first day of camp regarding their procedures and policies for "rain days".

**Questions regarding the registration process?** Please call Beckie Reed at (269) 565-3711, between 7:30 a.m. and 4:00 p.m.

### Please include all information requested:

NAME \_\_\_\_\_

PARENT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
(NO.) (STREET)

(CITY) (STATE) (ZIP)

PHONE # \_\_\_\_\_

WORK/CELL # \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ REGISTER FOR GRADE NEXT FALL \_\_\_\_\_

SPORT \_\_\_\_\_ CAMP SESSION # \_\_\_\_\_

CAMP DATES: \_\_\_\_\_ TIME: \_\_\_\_\_

T-SHIRT SIZE: (CIRCLE ONE)

YOUTH : Med Lg XL

ADULT: Sm Med Lg XL XXL

FEE: \$ \_\_\_\_\_ CASH OR CHECK # \_\_\_\_\_

**Include \$10.00 late registration fee after deadline as indicated on the sport specific form.**  
(Make check payable to: Lakeview High School)

**Check box if camp fee was paid online through PaySchools** (make sure you still send in this registration form by the deadline).

If you would like to use a debit or charge card, please complete the following information:

VISA  MASTERCARD  DISCOVER

CARD # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_

3 DIGIT VERIFICATION # \_\_\_\_\_ (last 3 digits of the number printed on the signature line on the back of the card)

NAME ON CREDIT CARD (Please Print) \_\_\_\_\_

CARDHOLDER'S SIGNATURE \_\_\_\_\_



**LAKEVIEW SCHOOL DISTRICT  
INSURANCE WAIVER**

I am aware that with the exception of a group catastrophic accident policy for high school athletes (that provides supplemental coverage only for injuries with costs in excess of \$25,000), the school district does not provide health insurance for my son/ daughter while at school, or while participating in athletics. I am also aware that the district makes available at my cost a health insurance plan that would cover my son/daughter. However, we/I decline the school offered program and take full responsibility for his/her accident insurance while at school, or a school related activity.

\_\_\_\_\_

*ATHLETE'S NAME*

\_\_\_\_\_

*SPORT*

\_\_\_\_\_

*PARENT/GUARDIAN SIGNATURE*

\_\_\_\_\_

*DATE*

OPTIONAL:

In case of injury my son/daughter is covered by:

INSURANCE COMPANY \_\_\_\_\_

GROUP/INDIVIDUAL POLICY# \_\_\_\_\_