

Colorado State University-Pueblo *presents*

# HALF RACK FOOTBALL CAMP

*Parks, Recreation and Cultural Services and CSU-Pueblo Football team up to provide a 2-day Half Rack camp that will focus on fundamentals, position drills, and techniques; with instruction, scrimmage situations, and 7-on-7 play.*

**FOR  
WHEN  
WHERE  
COST**

**\$80**  
PER CAMPER

**For Grades 2<sup>nd</sup>-5<sup>th</sup>**

**Tuesday & Wednesday; July 25-26**

**9 am-Noon**

**Venezia Park, 3555 Briargate Pkwy**

**Activity # 9123**

**For Grades 6<sup>th</sup>-8<sup>th</sup>**

**Tuesday & Wednesday; July 25-26**

**1-4 pm**

**Venezia Park, 3555 Briargate Pkwy**

**Activity # 9124**

**CAMP  
LED  
BY**



A five-time RMAC Coach of the Year and  
2014 National Coach of the Year,

**JOHN WRISTEN**

guided the ThunderWolves  
to the NCAA Division II National Championship  
in just seven short years.

Under his leadership, CSU-Pueblo  
has claimed RMAC Championships  
in five of the past six seasons.

**REGISTER NOW**

*Limited participants*

## NOTES

Shoulder pads and helmets required.

If a day is cancelled due to inclement weather;  
the make-up date is Thursday, July 27.

Participants should bring full water bottle(s)  
and wear sunscreen/bug spray.

**Questions? Call (719) 385-5981; [www.coloradosprings.gov/SportsCamps](http://www.coloradosprings.gov/SportsCamps)**

# YOUTH SPORTS MISSION

In pursuit of excellence in youth sports, we are committed to creating a positive environment for our youth's participation in and enjoyment of recreational sports.



## REGISTER NOW

### It's Easy to Register

- Select the park site most convenient for you.
- Choose one of our easy registration options.
- Make checks payable to: PRCS. *Visa, MasterCard, American Express and Discover are accepted*

**ONLINE:** [www.coloradosprings.gov/Youth-Sports](http://www.coloradosprings.gov/Youth-Sports)

**Click Register Here**

*credit card payment required*

### Mail-To, 24-Hour Drop Box, Walk-In:

Sports Office

*(northwest corner of Memorial Park)*

1315 East Pikes Peak Avenue

Colorado Springs, CO 80909

8 AM to 5 PM *(Weekdays. Closed City Holidays.)*

**Phone: (719) 385-5981**

### Refund Policy

- A full refund or credit is issued if the activity is canceled by the City.
- Once the program has started but is not yet 50% complete, an individual withdrawing from the activity can be refunded or credited 50% of the registration price.
- No refund or credit will be issued for a withdrawal if 50% or more of the program is completed.

### Adjusted Fee

The adjusted fee and payment plan programs were established to allow Recreation Services to serve more people fairly and efficiently. Adjusted fees are available for activities exceeding a registration cost of \$30.

## REGISTRATION FORM

**Parent/Guardian:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/Zip:** \_\_\_\_\_

**Primary Phone:** \_\_\_\_\_

**Secondary Phone:** \_\_\_\_\_

**Payment Method:** ☐ Cash ☐ Check ☐ Visa ☐ Mastercard ☐ Discover ☐ American Express ☐ MO ☐ Other \_\_\_\_\_

Participant's First and Last Name	M/F	Date of Birth	Activity #	Fee	Office Use

### ☐ I acknowledge and agree to the Terms of Use.

By submitting this application and account information, I agree to provide true, accurate, current and complete information about myself and family members. At any time, the City may request verification of the information provided in this application and account and I will provide the information immediately. If at any time I provide any information that is untrue, inaccurate, not current or incomplete, the City has the right to immediately suspend or terminate your account. Additionally, the City may suspend or terminate your individual or your family member's privileges to participate in this and any other City-sponsored activity. The City of Colorado Springs specifically reserves the right to request proof of the information that is a part of this account, including but not limited to, verification of the birth date of the participant.

### ☐ I acknowledge and agree to the Participant Warning Statement.

Although participation in supervised athletics and activities is generally considered safe, and serious injuries are not common, it is impossible to eliminate every risk. To help reduce accidents and injuries, players must obey safety rules, report all physical problems, follow a proper conditioning program and inspect their own equipment. By registering for this program, you acknowledge that you have read and understand this warning. Those who do not wish to accept the risk should not register or participate.

*The City of Colorado Springs carries no insurance for participants or spectators.*

*The Emergency Medical Service will be called for all medical emergencies, and individuals will be responsible for all ensuing charges.*

### ☐ I acknowledge and agree to the Photography Consent.

By registering in PRCS activities, you hereby consent to the photographing of your child by the City of Colorado Springs and/or their agents. You hereby consent to the use of these photographs singularly or in conjunction with other photographs or video recordings for PRCS marketing and training purposes without compensation.

**Inclusion Coordinator:** ☐ If you need an accommodation to participate, please check the box to have the Inclusion Coordinator contact you.

**Helping Hand Fund:** Yes, I would like to contribute ☐ \$1 ☐ \$5 ☐ \$10 or \$\_\_\_\_\_ to the PRCS Youth Scholarship Fund. This fund allows children, youth and teens to enroll in programs who otherwise would not have the opportunity to participate. Please include your donation with this registration. Thank you!

**INFORMATION PROVIDED BELOW WILL BE DESTROYED IMMEDIATELY AFTER REGISTRATION IS PROCESSED**

**Credit Card Number:** \_\_\_\_\_

**Exp. Date:** \_\_\_\_\_

**CVC Code:** \_\_\_\_\_

*I authorize PRCS to use my credit card for fees in the above listed activities*

Print Cardholder's Name

Signature of Cardholder