



# IRON SHARPENS IRON camp

## Philip Rivers

### QB & Offensive Skills Camp

Instruction is designed for all offensive positions

**Open To Ages 7 to 17**

**July 7 & 8 | 9am - 2pm**

**Huntsville High School - Huntsville, AL**

**Cost: \$175 / D1 Members: \$150**



**FULL TUITION MUST ACCOMPANY THIS APPLICATION. Send completed registration form along with check, money order or credit card information for \$175 (General Public) or \$150 (D1 Members) (no cash) payable to: D1 Huntsville c/o Philip Rivers I.S.I. Football Camp, 7242 Bailey Cove Rd , Huntsville, AL 35802.**

**Refunds for any reason, less \$15.00 handling fee, will only be available until June 23, 2009. (2 weeks prior to camp.)**

### Personal Information

\_\_\_ \$175 - General Public     \_\_\_ \$150 - D1 Member (D1 Location: \_\_\_\_\_)

**Athlete's Name:** \_\_\_\_\_ **Athlete's School/Team:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Last Grade Completed:** \_\_\_\_\_ **Birthday (xx/xx/xxxx)** \_\_\_\_\_ **Gender** \_\_\_\_\_

**Preferred Doctor** \_\_\_\_\_ **Doctor Phone** \_\_\_\_\_

**Preferred Hospital** \_\_\_\_\_ **Hospital Phone** \_\_\_\_\_

**Hospital Address** \_\_\_\_\_

**Medical History (allergies, asthma, injuries, etc.)** \_\_\_\_\_

**Parent/Guardian Name (first/last)** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Parent's Email Address\*** \_\_\_\_\_

**Please note:** All credit card payments include a \$6 credit card convenience fee. The signature below authorizes D1 Huntsville to charge my AMEX, MasterCard or Visa account \$181-General Public or \$156-D1 Member (includes \$6 cc convenience fee.)

**Card Type (circle one) AMEX    MasterCard    Visa    Account Number** \_\_\_\_\_

**Signature** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

I, the undersigned, submit that my son or daughter is physically fit to participate in strenuous athletic activity and release D1, D1 Iron Sharpens Iron Football Camp, Philip Rivers, Huntsville High School and all sponsors from any and all responsibility for injury or illness. I hereby authorize the directors the directors of the camp to act for me according to their best judgment in an emergency requiring medical attention. I understand that I am solely responsible for the payment of any such medical expenses and provide the camp proof of medical and accident insurance. I also understand that my deposit is subject to a handling fee. I consent to D1, its agents, and its photographers taking and/ or using photographs of my son/daughter for promotional/marketing purposes.

Parent or Guardian Signature

Date

Emergency Contact

\*For the quickest processing of your registration and payment, please include an email address. A confirmation e-mail/letter and additional medical information will be sent to each participant upon acceptance into the Philip Rivers Iron Sharpens Iron Football Camp. Specific site information will be included with your confirmation. Please note, if paying by credit card, a charge for D1 Huntsville will appear on your statement. For additional information, please contact Mike Gregory at 615.415.4747 or mike.gregory@d1sportstraining.com