

CAMP REGISTRATION FORM

REGISTRATION IS AVAILABLE ONLINE AT:
odea.org/athletics/summer-camps/

Camp registration and payments must be turned in to
O'Dea High School by Monday, June 11, 2018.

SEND CAMP REGISTRATION TO:

O'Dea High School / Attn: Football Camp
802 Terry Ave / Seattle, WA 98104

Make checks payable to: O'Dea High School

Name (last) _____ (first) _____

Address _____

City/State/Zip _____

Night Phone _____

Day Phone _____

Email _____

Parent(s) Names _____

Height _____ Weight _____

High School _____

Grade School _____

Grade in Fall _____

Position: Offense _____ Defense _____

T-Shirt Size (circle one) Adult S - M - L - XL - XXL

REGISTRATION PAYMENT

\$100 Team/Individual Camp (June 19, 20 & 21)

Camp includes camp T-Shirt and camp instruction.

Total Enclosed/Charge \$ _____

Card Number _____

Expiration Date _____

Security Code _____

Name on Card _____

Signature _____

Billing Address (Same as above)

Address _____

City/State/Zip _____

*Front and back copy of insurance card is required to participate
in camp activities. Please include with registration.*



FOOTBALL CAMP

June 19, 20, 21

GENESEE PLAYFIELD

Boys 4th – 9th Grade

Entering Fall 2018



FOOTBALL

27 Metro League
Football Championships

10-Time State Finalist

4-Time State Champions

SPORTSMANSHIP & TRADITION

O'Dea High School would like to invite you to the 11th Annual O'Dea Fighting Irish Football Camp. Our camp offers the very best team and individual football skill development in the Northwest. This is a non-contact camp with over three hours of on-field instruction per day. Come learn from some of the most outstanding coaches and players in the state!

CAMP COACHING STAFF

- O'Dea High School Coaches
- O'Dea High School Players
- Former O'Dea High School Players

DAILY SCHEDULE

8:30am Buses leave O'Dea
9:00am Practice Session Begins
9:00am Stretch, Agilities & Speed Work
9:30am Offensive Individual Session
10:00am Offensive Group Session
10:30am Offensive Team Session
11:00am Defensive Individual Session
11:30am Defensive Group Session
12:00pm Defensive Team Session
12:15pm Buses leave for O'Dea

A TRADITION OF WINNING, WITH HONOR

We are extremely proud of our tradition of excellence at O'Dea High School. Over the past 33 years we have been:

- Metro League Champions 24 times (27 overall)
- Qualified for the WIAA State football Championships 31 times
- State Semi-finalist 13 times
- State finalist 10 times
- Academic State Champions 3 times
- WIAA State Champion 4 times

During that time O'Dea has graduated over 100 college football players, over 50 of those at D-1 schools, and four NFL players.

ADDITIONAL INFORMATION

ITEMS TO BRING/WEAR

Proper workout attire: shorts, sweats, t-shirts and dry-fit or under armour, tennis shoes and football cleats, and a water bottle.

CAMP CHECK-IN

Tuesday, June 19th, 7:30am – 8:15am in the Courtyard at O'Dea High School.

Wednesday & Thursday you may meet at Genesee Field at 8:45am and be picked up (by a parent or guardian) at 12:15pm.

Genesee Field: 4316 S. Genesee St., Seattle, 98118

REGISTRATION AND PAYMENT

REGISTRATION IS AVAILABLE ONLINE AT:
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Please make all checks payable to O'Dea High School and mail to:

O'Dea High School
Attn: Football Camp
802 Terry Ave
Seattle, WA 98104

Walk-ups will be accepted.

ADDITIONAL FEES/CANCELLATION

Your \$100 camp fee will be refunded, less a \$25 service charge, if notification of cancellation is post marked prior to June 11, 2017. No refunds will be made after June 19, 2017, unless for medical reasons.

QUESTIONS

Please contact:

Monte Kohler, Athletic Director
206-624-2068 or odad@odea.org

Gabi Botello, Assistant Athletic Director
gbotello@odea.org

MEDICAL RELEASE FORM

THE MEDICAL RELEASE FORM IS AVAILABLE ONLINE AT:
odea.org/athletics/summer-camps/

I verify that (Camp Participant) _____

Is medically insured with (Provider) _____

Policy Number _____

Has dental insurance with (Provider) _____

Policy Number _____

The above insurance effectively covers any medical or dental cost incurred as a result of participation in the O'Dea Football Camp. Further, I authorize the Coaching staff at the O'Dea Football Camp to seek any necessary emergency medical or dental treatment my child may need during the course of camp.

Parent Signature _____

Current Medications _____

Current Allergies _____

ACKNOWLEDGEMENT OF RISK

As the parent/guardian of (Camp Participant) _____

I acknowledge the potential risk of injury related to participating in football and the physical activities associated with participation in the O'Dea Football Camp. I knowingly and voluntarily on behalf of the camp participant accept the risk of all such injuries that could occur due to participation in the camp.

Parent/Guardian Signature _____

Front and back copy of insurance card is required to participate in camp activities. Please include with registration.

