

2025 WOU FOOTBALL CAMP REGISTRATION

NAME _____ GRADE _____ SCHOOL _____ BIRTHDAY(MM/DD/YY) _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL _____ PHONE _____ HEIGHT _____ WEIGHT _____

OFFENSIVE POSITION _____ DEFENSIVE POSITION _____

HEALTH INSURANCE PROVIDER _____ POLICY NUMBER _____

EMERGENCY CONTACT _____ RELATION _____ PHONE NUMBER _____

ALLERGIES _____ MEDICATIONS _____

PRE-EXISTING MEDICAL CONDITIONS _____

CAMP INFORMATION

- Traditional dorm room in residence hall
- On campus, twin size beds, 2-3 players per room
- Accommodations vary by hall, ROOMMATES ASSIGNED BY HS COACH
- ALL meals provided at Valsetz Dining Hall
- First Meal is Dinner 6/20 and last meal is Breakfast 6/23

REQUIRED ITEMS

- ALL FOOTBALL GEAR/EQUIPMENT (helmet, shoulder pads, jersey, pants, girdle, thigh/knee pads, mouthpiece, cleats, etc.)
- BEDDING (Sheets, blankets, pillows)
Rooms just have mattress in them
- TOILETRIES & TOWELS
- EXTRA CLOTHING

RECOMMENDED ITEMS

- Portable fan for room
- Water bottle & Extra food/drinks
- Personal Electronics (Chargers, alarm clock, desired entertainment)

TURN IN REGISTRATION FORM TO HIGH SCHOOL HEAD COACH.

HEAD COACH SUBMITS FOLDER/BINDER OF ALL COMPLETED REGISTRATION FORMS AT CHECK IN.

PAYMENT IS DUE AT CHECK IN. ONE CHECK PER HIGH SCHOOL.

ALL CAMPERS MUST HAVE A CURRENT PHYSICAL ON FILE OR BE MEDICALLY CLEARED BY THEIR HIGH SCHOOL IN ORDER TO PARTICIPATE.

COST PER CAMPER
OVERNIGHT \$265

RELEASE OF LIABILITY & CONSENT FOR MEDICAL CARE AND TREATMENT

In consideration for being allowed to participate at the 2025 WOU Football Camp and all related events and activities in any way, the undersigned:

- AGREES THAT THE PARENT(S)/GUARDIANS WILL INSTRUCT THE PARTICIPANT TO INSPECT THE FACILITIES AND EQUIPMENT TO BE USED PRIOR TO PARTICIPATING, AND IF THE PARTICIPANT BELIEVES ANYTHING IS UNSAFE, THEY SHOULD IMMEDIATELY ADVISE HIS SUPERVISOR OF SUCH CONDITIONS AND REFUSE TO PARTICIPATE.
- ACKNOWLEDGES AND FULLY UNDERSTANDS THAT EACH PARTICIPANT WILL BE ENGAGING IN ACTIVITIES THAT INVOLVE RISK OF SERIOUS INJURY, INCLUDING PERMANENT DISABILITY AND DEATH, AS WELL AS THE SEVERE SOCIAL AND ECONOMIC LOSSES WHICH MIGHT RESULT NOT ONLY FROM THEIR ACTIONS, INACTIONS, OR NEGLIGENCE, BUT ALSO THE ACTIONS, INACTIONS, OR NEGLIGENCE OF OTHERS, AS WELL AS THE RULES OF PLAY AND THE CONDITION OF THE PREMISES OR ANY OF THE EQUIPMENT USED.
- ENTERS INTO A LEGALLY BINDING RELEASE, WAIVER, DISCHARGE, AND COVENANT NOT TO SUE THE 2025 WOU CAMP STAFF/WOU STAFF/WESTERN OREGON UNIVERSITY FOR ANY AND ALL LIABILITY TO EACH OF THE UNDERSIGNED, HIS OR HER HEIRS, AND NEXT OF KIN, FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES ON ACCOUNT OF INJURY (INCLUDING DEATH OR DAMAGE TO PROPERTY) CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASES OR OTHERWISE.
- ASSUMES ALL THE FOREGOING RISKS AND ACCEPTS PERSONAL RESPONSIBILITY FOR THE DAMAGES FOLLOWING SUCH INJURY, PERMANENT DISABILITY, OR DEATH.
- AUTHORIZES ALL MEDICAL, SURGICAL, DIAGNOSTIC, AND HOSPITAL PROCEDURES AS MAY BE PERFORMED OR PRESENTED BY A PHYSICIAN FOR THE ABOVE IF IT CANNOT BE REACHED IN CASE OF EMERGENCY.

WE HAVE READ THE ABOVE WAIVER AND RELEASE AND THEREFORE VOLUNTARILY UNDERSTAND THAT WE GIVE UP SUBSTANTIAL RIGHTS BY SIGNING BELOW. WE ALSO UNDERSTAND THAT THE WOU CAMP STAFF MAY TAKE PHOTOGRAPHS OF PARTICIPANTS AND ACTIVITIES DURING CAMP AND MAY USE SUCH PHOTOGRAPHS IN PROMOTION OF FUTURE WOU CAMPS. AT 12:00 AM ON 6/20 ALL SALES ARE FINAL. SORRY, NO REFUNDS.

PARTICIPANT SIGNATURE _____

DATE _____

PARENT/GUARDIAN SIGNATURE _____

DATE _____

JUNE 20TH - JUNE 23RD 2025