

# 5th Annual GI Jamboree at GINW

<b><u>Session 1: June 6 &amp; 7</u></b>	<b><u>Session 2: June 8 &amp; 9</u></b>
<i>Each school is <u>asked</u> (but not required) to have 3 Teams - Varsity, JV and C Teams.</i>	<i>Each school is <u>asked</u> (but not required) to have 2 Teams - Varsity &amp; JV Teams. 1 team will also work.</i>
This session is intended for Larger schools (Class A, B & Class C with a really good number of players..	This session is intended for schools with Varsity or Var/JV teams due to smaller player numbers.

9:00 am            Fields are open for teams to practice.

**12:30 pm        Workout #1**

3:30 pm            Coaches Meeting & lunch provided by GINW.

**4:30 pm        Workout #2**

7:30 pm            Coaches Meeting & lunch provided by GINW.

*Break for the day. Teams have traveled to/from each day, stayed in hotels & slept on GINW wrestling mats for free.*

8:30 am            Teams warm-up on their own.

**9:00 am        Workout #3**

11:30 am          Coaches Meeting & lunch provided by GINW.

**12:30 pm        Workout #4**

**Suggested General Workout Format:**

*30 Minute Team Prep.*

*60 Minute Group and Team Competition.*

*30 Minute Team Correction.*

~ Certified Athletic Trainer on site.

~ Catastrophic Insurance through: Dissinger Reed.

~ It is recommended that each player have primary insurance to participate.

~ Each player must bring needed equipment.

## **Camp Registration Form**

Coaches please collect & mail (or bring on June 7) your teams registrations and \$50 fee to Coach Stein

**Make Checks payable to "NWHS - Football" ... Give forms & money to your Head Coach.**

Name: \_\_\_\_\_ School: \_\_\_\_\_ Fall Grade: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone#: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Emergency Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

### **Medical Release**

*I hereby authorize the members of the coaching staff of the GI Jamboree to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release the camp's personnel from any liability for any injuries or illnesses incurred while attending the GI Jamboree.*

Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Medical Insurance Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_

**Videos / Pictures / Forms for GI Jamborees can be viewed at:**

<http://bit.ly/22Jamboree>