

# FOOTBALL REGISTRATION

Student Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_

Grade in August 2023: \_\_\_\_\_

T-Shirt Size: Youth or Adult (circle one)

S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

Day time phone numbers to contact parents:

Mother's phone: \_\_\_\_\_

Father's Phone: \_\_\_\_\_

In the event of illness or injury, notify the following persons if parents cannot be reached:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

## PAYMENT

- Payment is to be made by check or cash
- Make checks payable to VCA
- Bring registration form and payment to the Athletic Office or mail to Valley Christian Academy



# 2023



## VALLEY CHRISTIAN ACADEMY

### July 6 - 7



## To Contact Us:

**Athletic Director**  
Peter Fortier

Valley Christian Academy  
2970 Santa Maria Way  
Santa Maria, CA 93455

Phone: 805-614-7322 Fax: 805-934-2563  
E-mail: [pfortier@vcalions.com](mailto:pfortier@vcalions.com)

## FOOTBALL CAMP

**DATE:** July 6-7

**TIME:** 3rd-8th Grades 9:00-12:00 noon

**COST:** \$40  
\$30 - If registered by June 3rd

### T-SHIRT:

One free T-shirt for everyone who participates in any of the 2023 Summer Sports Camps here at Valley Christian Academy.

### PLEASE WEAR:

Shorts or sweats, cleats (if you have them), or tennis shoes.



## COACH PETER FORTIER

We are excited to announce that our very own Coach Fortier will be directing Football Camp this year. As a 1983 Valley Christian Academy graduate and a 1987 Maranatha Baptist Bible College graduate, Coach Fortier brings extensive football knowledge and experience to this year's camp. He has coached Lion Varsity football for 15 years and led his 1997 team to a major CIF championship. This year marks his 16th year as the Valley Christian Athletic Director.



**Welcome Coach Fortier!**

## FOOTBALL MEDICAL RELEASE

Student Name: \_\_\_\_\_

Medical Insurance: \_\_\_\_\_

Policy #: \_\_\_\_\_

Group #: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I hereby authorize my child's participation at Valley Christian Academy's Football Camp. I know of no mental or physical reason why my child cannot safely participate in the basketball camp activities. The camp staff is authorized to attend to any health problem or injury my child may incur while attending the camp. In case of medical emergency, I hereby give permission to the physician selected by the camp staff to hospitalize, secure proper treatment for, and to order injection, x-ray, anesthesia, or surgery for my child as named above. Neither my child or myself will hold Valley Christian Academy or its staff liable for any injuries or expenses related to injuries incurred while at camp.

\_\_\_\_\_  
Parent /Guardian Signature

\_\_\_\_\_  
Date