Spartan Football Camp Application

Register at: www.sportcamps.msu.edu

Please print information below or enroll online.

Name

Address

City State Zip

Parent or Guardian ( )

Daytime Telephone

Evening Telephone

Grade in September Age

Date of Birth Height Weight

Roommate preference

Suitemate preference Suitemate preference

(A SUITE IS TWO ROOMS WITH CONNECTING BATH)

Please enroll me in the following Football Camp:

CAMP DATE	RESIDENT	COMMUTER
Youth Camp June 21-23	☐ $299.00	☐ $240.00
High School Camp June 24-26	☐ $299.00	☐ $240.00

U.S. FUNDS ONLY. Please make checks payable to:
MICHIGAN STATE UNIVERSITY

MasterCard/Visa Number

3 digit code Exp. Date

Signature

Amount of Check/Charge enclosed

Send Application and Medical Treatment Form with payment in full to:

MICHIGAN STATE UNIVERSITY
Sports Camp Office
402 Jenison Field House
East Lansing, MI 48824-1025
Fax: 1-517-355-6891

Medical Authorization Form

Participant's Name DOB___/____/____

FOOTBALL

What Sport

Date of Camp

Participants are automatically enrolled in MSU's accident insurance plan. Eligible covered expenses will be paid only if they are in excess of other valid and collectible insurance.

1. List any medical conditions that camp personnel should be aware of (use additional pages if necessary):

2. List any medications currently taking:

3. List any allergies:

In case of emergency please contact:

Name

Daytime Telephone

Evening Telephone

Name of Medical Insurance

Company Telephone

Insurance Policy Numbers

______________________________, as parent or legal guardian of the participant named above, authorizes MSU to seek medical and/or surgical treatment which is reasonably necessary to care for the participant. I further authorize the medical facility that treats the participant to release all information needed to complete insurance claims. I acknowledge my responsibility to pay all costs associated with the participant's medical care and authorize all insurance payments, if any, to be made directly to the medical facility.

Signature (parent or guardian)

Date