

2018 Jackson-Milton Youth Football Camp Permission Slip

When: June 4th 5th and 6th 3:45pm- 6:00 pm

Where: Jackson-Milton HS Football Practice Fields

Mail Permission Slip to Coach Brode @ JMHS: 10748 Mahoning Ave, North Jackson, OH
44451

Permission Slips will also be available for you to sign when you drop off your child.

I certify that my child has no injury which would limit his/her participation in camp, and has had a physical examination during the past year. I also authorize the director of the camp to act for me in any emergency requiring medical attention. I hereby release, exonerate and discharge the Jackson-Milton Local Schools and its employees from any, or all actions or causes of actions, known from any injuries incurred in camp or on the way to or from camp. I have medical coverage and will be responsible for any medical or other charges related to his/her attendance at camp. I give my child permission to attend the Jackson-Milton Youth Football Camp.

Parent's Name: _____

Signature: _____

Date: ___/___/___

QUESTIONS? Email Coach Brode: Nathan.brode@jmlocal.com

Phone- 330-538-3308 ext 1210

