Resident and Commuter Camps

These camps are designed to give each individual athlete a solid foundation in the basic football fundamentals needed to excel at his specific position. These camps are directed by the Michigan State University coaching staff, as well as guest college and high school coaches from around the country. You will receive the same expert coaching that every Michigan State football player receives. Michigan State football players will serve as camp counselors and work closely with all campers.

June 14
7 on 7 Team High School Passing Camp
(28 teams maximum) $330.00 per team

Offensive/Defensive Line Technique Camp
Entering grades 9-12 $190.00 per camper
REGISTRATION:
8:00-10:00am Skandalaris Football Complex
10:30am - 3:00pm

June 19-20
Youth Camp
*Entering grades 3-8
June 19 Check In:
8:00-9:00am
Skandalaris Football Complex
JUNE 14 Check Out: 3:45pm
Commuter Camper $220.00

June 22
Kicking/Long Snapping Camp
Entering grades 9-12
REGISTRATION:
Noon-1:00pm Skandalaris Football Complex
1:00 - 3:30pm
$90.00 per camper

June 21-22
Rising Stars High School Position Camp
Entering grades 9-12
June 21 Check In:
8:00-10:00am Munn Ice Arena
JUNE 22 Check Out:
11:30am
Resident Camper $280.00
Commuter Camper $180.00

CAMP INFORMATION

FACILITIES
MSU Grass Fields, Duffy Daugherty Football Building (including the indoor football complex and weight room). IM West Pool, excellent residence and dining facilities.

REFUND POLICY
Camps unable to attend camp are entitled to a refund. A $55 administrative fee (only $30 if you enrolled online) will be deducted from all refunds, regardless of the reason. Refund requests must be submitted in writing PRIOR to the first day of the camp session in which the camper was originally enrolled. No refunds for any reason (i.e. injury, illness) will be given once a camper is on campus.

Contact: 517-355-6891 email: msucamps@msu.edu

EQUIPMENT
Workout gear necessary: football helmet, mouth piece (high school only), football cleats, athletic shoes, shorts, sweats and towels. You may also want to bring an alarm clock and electrical fan. Helmets are not required for youth camp.

MEDICAL POLICY
Each participant should have his or her own medical insurance. Certified athletic trainers will always be available. 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. No physicals are required.

REGISTRATION INFORMATION
Register online at www.sport.camps/msu.edu or complete the attached application. Full payment by either check, MasterCard, VISA or Discover must accompany the application. Make checks payable to Michigan State University. No applications will be accepted before February 1st. You will receive confirmation for receipt of enrollment by mail within 12-15 business days.

WALK-IN REGISTRATION POLICY
Walk-in registration (signing up on the day camp begins) will be accepted on a space available, first come, first served basis. An additional $10.00 fee will be charged for walk-in registrations.

MSU SPORT CAMP POLICY
Persons enrolled in MSU Sport Camps will be required to attend all sessions and to comply with the rules and regulations of Michigan State University governing the conduct of all students on the campus.

CONTACT INFORMATION
SPORT SPECIFIC QUESTIONS: 517-355-1647
Fax: 517-355-6891 Email: msucamps@msu.edu
www.sportcamps.msu.edu

CONCUSSION DANGER SIGNS
In rare cases, a dangerous bleed may form on the brain or in a person with a concussion and crowd the brain against the skull. An athlete should receive immediate medical attention if any of the following danger signs:

• One pupil larger than the other
• Drowsy or unable to awaken
• A headache that gets worse
• Weakness, numbness, or decreased coordination
• Repeated vomiting or nausea
• Marred speech
• Changes in sleep or eating
• Nausea or vomiting
• Loss of consciousness (even a brief loss of consciousness should be taken seriously)

WHY SHOULD AN ATHLETE REPORT THEIR SYMPTOMS?
If an athlete has a concussion, his/her brain needs time to heal. While an athlete’s brain is still healing, s/he is much more likely to have another concussion. Repeat concussions can increase the time it takes to recover. In rare cases, repeat concussions in young athletes can result in brain swelling or permanent damage to their brain. They can even be fatal.

STUDENT-ATHLETE NAME PRINTED
STUDENT-ATHLETE NAME SIGNED
DATE

PARENT OR GUARDIAN NAME PRINTED
PARENT OR GUARDIAN NAME SIGNED
DATE

Join the conversation, www.facebook.com/CDCHeadsUp

>> www.cdc.gov/concussion

Content Source: CDC’s Heads Up Program. Created through a grant to the CDC Foundation from the National Operating Committee on Standards for Athletic Equipment (NOCSAE).

TO LEARN MORE GO TO www.cdc.gov/concussion

www.msu.edu
2017 SPARTAN FOOTBALL CAMPS

June 14
7 on 7 Team High School Passing Camp
Offensive/Defensive Line Technique Camp

June 19-20
Youth Camp

June 22
Kicking/Long Snapping Camp

June 21-22
Rising Stars High School Camp

IT ALL STARTS HERE.
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 ______

High School ____________ Middle School ____________ Elementary School ____________

Circle adult t-shirt size:  S       M       L       XL       XXL       XXXL

Circle preferred position:  DB     LB     DL     OL     QB     WR     RB     TE

Please enroll me in the following Football Camp:

Camp                     Date            after May 1
7 on 7 Team High School  June 14         $330.00
Passing Camp             June 14         $90.00
O/D Line Technique       June 19-20     $220.00
Youth Camp               June 14         $90.00
Kicking/Long Snapping Camp June 22     $90.00
Rising Stars High School Camp June 21-22
Resident Camper          $280.00
Commuter Camper          $180.00

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

Check one:  CHECK  MASTERCARD  VISA  DISCOVER  AMERICAN EXPRESS

Card Number _______ 3 digit security code _______

Exp. Date _______ Amount of Check/Charge enclosed _______

Signature ____________________________

MEDICAL TREATMENT AUTHORIZATION FORM

Participant’s Name Date of Birth

What Sport  FOOTBALL

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 ____________________________

Insurance Information:

Name of Medical Insurance Company ____________________________ Insurance Company Telephone ____________________________

Name of Insurance Policy Holder ____________________________ Policy Holder DOB ____________

Medical Insurance Policy Number ____________________________ Medical Insurance Group# (if appl) ____________________________

I, ____________________________ , as parent or legal guardian of the participant named above, authorize 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 ____________

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

MICHIGAN STATE UNIVERSITY: