

Sequoit Football Summer Camp 2024-All Levels

Monday 6/3-Thu 6/6-Weight Deck(11:00 a.m.-12:30 a.m.)
Monday 6/10- Weight Deck
Tuesday 6/11- Weight Deck-Equipment Pick up after Weight Deck
Thursday 6/12-6/13 11:00 a.m.-3:00 p.m.
Monday 6/17-Thursday 6/20-11:00 a.m.-3:00 p.m.
Monday 6/24- Thursday 6/27- 11:00 a.m.-3:00 p.m.
Monday 7/1-Combine Day- 10:00 a.m.
Tuesday 7/2- 8:00 a.m.-12:00 p.m.
Monday 7/8-Thursday 7/11- 8:00 a.m.-12:00 p.m.
Monday 7/15-Thursday 7/18- 8:00 a.m.-12:00 p.m.
Monday 7/22- Thursday 7/25- 8:00 a.m.-12:00 p.m.
Monday 7/29- Wednesday 7/30- 8:00 a.m.-12:00 p.m.
Wednesday 7/31 8:00 a.m.-12:00 p.m.-Last day of camp, Scrimmage and Eval Day

Cost: \$130 (includes mouthpiece) No refunds under any circumstances!

Who may attend: Students who reside in the Antioch High School District.

Where: McMillen Practice Fields and Stadium

Equipment needed: Cleats, T-shirt, and shorts.

Other information: Locker rooms/showers available.

Camp Director: Brian Glashagel-Brian.Glashagel@chsd117.org

Make sure to join us on Facebook at "Antioch Sequoits Football" OR follow us on Twitter @SequoitFootball.

Winning is the result of doing the little things right! It is the result of hard work and an intense burning desire to not stop short of your goal! Winning takes a season, off-season, summer and pre-season dedication to accept nothing less than your best. Winning is a commitment of excellence to be the best you can be at all times!

Make checks payable to: ANTIOCH SUMMER FOOTBALL CAMP (\$130)

Mail to: Brian Glashagel-Head Football Coach
Antioch Community High School
1133 S. Main St., Antioch, IL 60002

OR go to sequiotfootball.com to pay online

Sequoit Football Camp APPLICATION FORM AND WAIVER (mail \$130 in with check)

Name_____ Address_____

City_____ Phone_____ Email:_____

Please note: The cost of camp remains the same, whether a student attends all of the program sessions, or just a portion of Camp. In consideration of your acceptance of my application, I am intending to be legally bound hereby, for myself, my heirs, executors and administrators, waive and release the Antioch Summer Football Camp and members of it's staff from any and all claims or rights to damages for injuries or losses suffered while attending Antioch Summer Football Camp at Antioch Community High School. In case of injury or illness, necessary treatment is authorized by the undersigned. Applicant is covered by _____ Insurance Company, Policy No._____

Parent or Legal Guardian _____
(Signed)

Date_____ Parent/Guardian Emergency Phone#:_____

Office Use Only: Check Number _____ Amount _____ Date Rec'd _____