

**2021 Instructional Staff will include:**

*\*Rick Byers-Turner High School*

1998 Metro Sports Coach of the Year  
1999 KC Star Metro Coach of the Year  
1999 KC Chiefs Missouri Coach of the Year  
1998 & 2000 Missouri 2A Coach of the Year  
2001 Cecil Patterson Award  
2002 Missouri Class 2 Coach of the Year  
2016 Missouri FB Coaches Assoc. HOF  
2016 GKCFCA HOF

*\*Turner High School Football Coaching Staff*

*Trainers on Site*

**Camp Information:**

\*Wear shorts, tennis shoes, T-shirt, etc.  
\*Water available throughout the day  
\*\*Both offense and defensive skills presented  
\*Transportation to and from the camp is the responsibility of the parent.

**Turner  
Golden Bear  
2021  
Football Camp**



**July 27<sup>th</sup>-29<sup>th</sup>  
Tuesday-Thursday  
6 PM – 8 PM**

**Turner High School  
800 S. 55<sup>th</sup> St.  
Kansas City, Ks. 66106**

**HOME OF THE  
GOLDEN BEARS**

**\$20 Camp Fee**

**Includes - Instruction /**

**T-Shirt**

**Grades: K thru 6<sup>th</sup>**

## Camp Information

**CAMP DATES: JULY 27<sup>TH</sup> -29<sup>TH</sup>**

**Location:** Turner High School, DAC

**Time:** 6:00pm – 8:00pm

**For Grades: Entering: K- 6<sup>th</sup> grades.**

**Camp Fee:** \$20 - \*Checks payable to:  
Turner High School Football

***\*Registration Deadline July 23<sup>d</sup>,  
2021***

**Trainer will be available.**

**For More Information Call:**

**\*Always have Tennis Shoes &  
Cleats.**

**\* Bring Sun Screen**

## Registration Form

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

Age: \_\_\_\_\_ Grade: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

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

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

T-shirt Size (check one) Youth Sizes

Small  Medium  Large  
 X-Large

Have you played organized football?

Yes  No

Team: \_\_\_\_\_

Coach: \_\_\_\_\_

Position(s): \_\_\_\_\_

## Parent Information & Waiver Form

Father's Name: \_\_\_\_\_

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

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

Mother's Name: \_\_\_\_\_

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

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

Please list any medical conditions,  
allergies, or special physical  
requirements for your child:  
  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I have listed all special circumstances in  
regard to my child. I hereby waive all  
claims for injury or accident or liability  
of any kind. I release Turner High  
School and Unified School District 202.

\_\_\_\_\_  
Parent Signature Date

**Make checks payable to:**

***Turner High School  
Football***