

COACHING STAFF
Summer 2016 Athletes will engage in an action packed and informative football camp led by MMAA's former NFL, CFL, and Division I players. Campers will be provided with a first-class learning environment. Michigan Made Advance Athletics is devoted to each individual athlete's progress and development from athlete to student athlete. At MMAA, our goal is to provide a superior product; meaning if an athlete desires to travel this path, why not do it at the top of the class on and off the field and show the sports world what it means to be Michigan Made. "Be a Game Breaker"

LEARN FROM THE PROS!



GAME BREAKERS 2014 FOOTBALL CAMP PRESENTED BY



PARTNERS



www.SWAGNEW.com

2016

MMAA & VINCE AGNEW

FOOTBALL CAMP

July 8, 2016

MVP Fieldhouse

Michigan Made
Advanced Athletics
and
Vincent Agnew
Present

Game Breakers
SWAGNEW FOOTBALL CAMP

CAMP INFORMATION

Location:
MVP Fieldhouse
5435 28th Street Court
Grand Rapids, MI 49546

Date: and Time
July 8, 2016
9 AM - 3 PM Day 1
Parents invited for awards
presentations at 2:30 PM

Who Can Attend:
Youth - 5th thru 8th grade

July 8, 2016

What to Bring:
Campers should wear football
cleats, mouth guard, shorts, t-
shirt, and most importantly, a pos-
itive attitude

FOR MORE INFORMATION VISIT:
www.SWAGNEW.com

Camp Features:

- Position-Specific Drills
(1-on-1) and Teams
- Informal Classroom / Chalk Talk
Education
- Strength, Agility, Re-Action &
Movement Training
- Nutrition and Supplementation
Education
- Real life Class (Leadership De-
velopment)

What is Included:

- Lunch
- T-Shirt and opportunity to win
other prizes
- Certificate of participation

Former NFL, CFL, and Division I
players attend camp to work with
the participants, speak about life
as an athlete, and sign auto-
graphs.

Fundamentals of all positions on
offense, defense and special
teams will be taught.

In addition we will discuss life
skills such as goal setting, team-
work, communication, sportsman-
ship, the importance of education
and developing leadership quali-
ties in school, in the community,
at home, and on the playing field.

**REGISTER ONLINE OR MAIL
REGISTRATION FORM TO:**

V. Agnew
3501 Lk Eastbrook Blvd, #258
Grand Rapids, MI 49546



CAMPER

PLAYER FIRST NAME _____ LAST NAME _____

PARENT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP COE _____

AGE _____ BIRTHDATE _____ WEIGHT/HEIGHT _____

SCHOOL _____ GRADE _____

DAYTIME PHONE _____ E-MAIL _____

T-SHIRT SIZE (CHILD)
 S M L XL

FOOTBALL POSITION _____

PLAYER FEE—\$65

PAYMENT METHOD

- CHECK PAYABLE TO SWAGNEW FOOTBALL CAMP
 VISA MASTERCARD DISCOVER

CARD # _____ EXP. DATE _____

EXP. DATE _____ 3 OR 4 DIGIT CVC _____

NAME ON CARD _____

SIGNATURE _____

**MEDICAL RELEASE - ATTACHED
RELEASE OF CLAIMS - ATTACHED
MEDIA RELEASE - ATTACHED**

Parent or Guardian (SIGNATURE REQUIRED) _____

Date _____ Relationship _____



SWAGNEW FOOTBALL CAMP MEDIA RELEASE

By signing this release form,

I authorize SWAGNEW Football Camp (SWAGNEW) permission to photograph me, take motion pictures of me, take video footage of me, and/or make electronic sound recordings of me.

I authorize SWAGNEW to use the following personal information:

- (1) My picture – including photographic, motion picture, and electronic video images.
- (2) My voice – including sound and video recordings.

I hereby grant to SWAGNEW, its subsidiaries, licensees, successors and assigns, the right to use, publish, and reproduce, for all purposes, my name, pictures of me in film or electronic video form, sound and video recordings of my voice, and printed and electronic copy of the information described in sections (1) and (2) above in any and all media including, without limitation, cable and broadcast, television and the Internet, and for exhibition, distribution, promotion, advertising, sale, press conferences, meetings, hearings, educational, and in brochures and other print or social media. This permission extends to all languages, media, formats and markets now known or hereafter devised. This permission shall continue forever unless I revoke the permission in writing.

I further grant SWAGNEW all rights, title, and interest that I may have in all finished pictures, negatives, reproductions, and copies of the original print, and further grant SWAGNEW the right to give, sell, transfer, and exhibit the print in copies or facsimiles thereof, for marketing, communications, or advertising purposes, as it deems fit.

I hereby waive the right to receive any payment for signing this release and waive the right to receive any payment for SWAGNEW's use of any of the material described above for any of the purposes authorized by this release. I waive any right to royalties and other compensations arising from or related to the use of the image. I also waive any right to inspect or approve finished photographs, audio, video, multimedia, or advertising recordings and copy or printed matter or computer generated scanned image, and other electronic media that may be used in conjunction therewith or to approve the eventual use that it might be applied.

- I acknowledge that I have read the foregoing and I fully understand the contents. I hereby certify that I am the parent or guardian of _____, who is under the age of eighteen years, to whom this release applies and that I have the legal authority to execute this release. I approve the foregoing and agree we both shall be bound thereby.
- I acknowledge that I have read the foregoing and I fully understand the contents. I approve the foregoing and agree we both shall be bound thereby.

IN WITNESS WHEREOF, I have executed this release on this _____ day of _____, 2016.

Parent/Guardian Name: _____ Phone: _____

Athlete Name: _____

Address: _____

Signature: _____

MEDICAL RELEASE

In case of a medical emergency or accidental injury concerning my child, I hereby authorize the camp officials of MMAA & SWAGNEW Football Camp to perform or obtain for the benefit of my child any emergency medical care they deem necessary. In my absence, I further authorize the camp officials to consent to any necessary x-ray examination, anesthetic, medical or surgical diagnosis of treatment, and/or hospital care concerning my child.

Parent or Guardian (SIGNATURE REQUIRED)

Date

Relationship

RELEASE OF ALL CLAIMS

In consideration of the acceptance of my registration form and the permission granted my child to enter the premises and participate in the MMAA & SWAGNEW Football Camp. I do hereby, for myself and my child, our heirs and assigns, forever waive, release, remise, and discharge the owners, operators, and sponsors of said premises, said camp activities, any vehicle and equipment used therein, and their respective servants, agents, officers and officials, and other participants in said camp activities, of, from and against all claims, demands, actions, causes of actions of any sort, and any and all liability or injuries sustained by my child and/or his or her property, arising out of or connected in anyway with, my child's participation in said camp activities, even though such liabilities or injuries may arise out of negligence or carelessness on the part of persons or entities mentioned above. I understand that participants in said camp may sustain serious accidental injuries and/or property damage. I know the inherent risks involved in the game of football. I agree to assume those risks and to release and hold harmless all of the persons or entities mentioned above who (through negligence or carelessness) might otherwise be liable for damages. I agree that this waiver, release, and assumption of risk is to be binding on my heirs and assigns forever.

Parent or Guardian (SIGNATURE REQUIRED)

Date

Relationship