

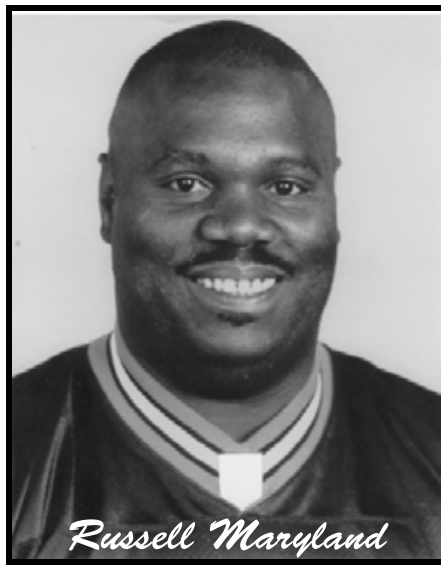
# PLAY FOOTBALL WITH THE STARS!

## AT **RUSSELL MARYLAND'S** 2007

### **Football Clinic**

**SATURDAY MAY 5TH**  
**AT DRAGON STADIUM**  
**3:00 P.M. - 5:00 P.M.**  
**(2:30 P.M. CHECK IN)**

**\* 3RD - 8TH GRADES ONLY**



*Russell Maryland*

3 time Super Bowl Champ  
Vice President Special Events of DFD Foundation

**COME PLAY WITH  
PRO NFL PLAYERS &  
STATE CHAMPION  
DRAGON FOOTBALL MEMBERS.**

**STATIONS INCLUDE  
OFFENSIVE AND DEFENSIVE  
MANEUVERS.**

**TICKET PURCHASES ARE LIMITED TO TEN TICKETS PER PARTICIPATING CAMPUSES.  
PARTICIPANTS MUST BE IN GRADES THREE THROUGH EIGHT.**

Rules are as follows:

1. Your completed entrance form is a contractual agreement to purchase one ticket for the Second Annual Russell Maryland Football Clinic to be held on May 5, 2007 from 2:30 to 5:00 p.m.
2. Complete the form below, detach, and place in the DFD box located in the reception area of your participating school; or mail to: DFD c/o Russel Maryland's Football Clinic - PO Box 93583 - Southlake, TX 76092  
Any question call 817-949-8246 or email DFD@CISDmail.com
3. Deadline for receipt of forms is Tuesday, April 25, 2007 at 2:00 p.m.

**Ticket payment of \$100 must be received no later than Tuesday, April 25, 2007. (\*Late registration \$125)**

Student's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Student's Grade: \_\_\_\_\_ Student's School: \_\_\_\_\_ T-Shirt Size: YS, YM, YL, AS, AM, AXL AXXL

Waiver Statement: Entry invalid if not signed. In consideration of the acceptance of this registration entry, I the undersigned assume full and complete responsibility for any injury or accident, which may occur during my participation in the event or while I am on the premises of the event. I hereby release and hold harmless Russell Maryland's Football Clinic, The Dragon's Fire, Digging for Dragons Foundation and its members and executive board, Carroll Independent School District (CISD) and its faculty and staff and executive board, the sponsors, promoters, volunteers, and all other persons and entities associated with the event or their agents or employees or otherwise. I assume the risk associated with this event, including but not limited to falls, contact with other participants, the effects of weather. Fees are non-refundable. I have read the foregoing and certify my agreement by this signature, and my parent's or guardian's if under 18.

Parent Name: \_\_\_\_\_ / Parent Signature: \_\_\_\_\_