

# JAMESTOWN FOOTBALL

## 2026 JAMESTOWN AREA YOUTH FOOTBALL CAMP

**Monday June 29th - Thursday July 2nd**

**11:00 AM-1:00 PM @ Strider Field (195 Martin Road, Jamestown)**

Camp Details: Area students between the ages of 5-12 are invited to the Jamestown Area Youth Football Camp. This camp is open to all youth players, not just children who live in Jamestown. The goal of the Jamestown Area Youth Football Camp is for campers to have fun and to learn/improve on the fundamentals of football. Campers will receive four days of instruction that focuses on fundamental football skills and games. Instruction and drills will be led by JHS Football Coaches and current players.

Cost: The cost of the camp is \$60. For families with multiple children participating, the cost is \$60 for one camper and \$20 for each additional sibling. All campers who register by June 1st will receive a camp gift. Checks can be made payable to "Jamestown High School Football."

Speed Camp: For children participating in the speed camp from 9:00-10:30, supervision will be provided from 10:30-11:00. Participants are strongly encouraged to bring a snack/drink for the 30 minute break. The football camp and speed camp are separate camps and there is a separate fee for each camp. You can register for Speed Camp by emailing Coach Cristin Hockenberry @ [cristin.m.hockenberry@jpsny.org](mailto:cristin.m.hockenberry@jpsny.org)

### THERE ARE TWO WAYS TO REGISTER:

**1) Fill out the information below and mail flyer and payment to:**

Coach Tom Langworthy  
Jamestown High School  
350 E. 2nd Street, Jamestown, NY 14701

**2) Scan the QR code to register, then mail payment to:**

Coach Tom Langworthy, Jamestown High School  
350 E. 2nd Street, Jamestown, NY 14701  
*(registration will be completed upon receipt of payment)*  
*(Venmo unavailable, please pay by check or cash by 6/1/26)*



Participant Name: \_\_\_\_\_ Age (as of June 2026): \_\_\_\_\_ Grade (Sept 2026) \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Secondary Contact Phone: \_\_\_\_\_

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

T-Shirt Size (circle): Youth Small Youth Medium Youth Large Youth XL Adult Small Adult Medium Adult Large

I verify that my child has medical insurance and is physically able to participate in the Jamestown Area Youth Football Camp. I agree to allow my child to be treated by a certified coach or trainer while attending camp. I verify that my child will behave appropriately while at camp, and if behavior is disruptive to the camp, the camper may not be allowed to continue at camp. I understand that when this registration is received, there will be no refund.

Parent Name: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_