



# COMETS FOOTBALL

## *Youth Camp*

**JULY 22, 2025 – 5:30 TO 8 P.M. EACH DAY**

**Kids in grades 3 through 6 are invited to participate.**

**Campers will be on the field doing drills with Comets Football coaching staff.**

**No helmets or shoulder pads needed.**

**Campers will need to wear shorts and football shoes.**

**Campers will be put into groups based on grade.**

**Snacks and water will be provided.**

**Participants will receive a T-shirt at the end of camp.**

### **REGISTRATION INFORMATION**

Registration fee: \$50/camper. Register at [www.mayvillestate.edu/youthFBcamp](http://www.mayvillestate.edu/youthFBcamp)

### **LOCATION**

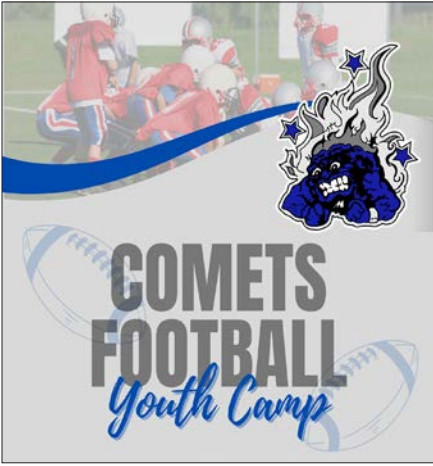
Jerome Berg Field – Mayville State University



**[www.mayvillestate.edu/youthFBcamp](http://www.mayvillestate.edu/youthFBcamp)**

Questions? [rocky.larson@mayvillestate.edu](mailto:rocky.larson@mayvillestate.edu)





# Mayville State University COMETS FOOTBALL YOUTH CAMP

July 22, 2025

5:30 to 8 p.m. @ Jerome Berg Field

## CAMP DETAILS:

- Kids in grades 3 through 6 are invited to participate.
- Campers will be on the field doing drills with Comets Football coaching staff.
- No helmets or shoulder pads needed.
- Campers will need to wear shorts and football shoes.
- Campers will be put into groups based on grade.
- Snacks and water will be provided.
- Participants will receive a T-shirt at the end of camp.

## REGISTER BY MAIL

**Mail this completed form and registration fee of \$50 per camper to:**

Mayville State University  
Comets Football Youth Camp  
330 Third Street NE  
Mayville, ND 58257

## REGISTER ONLINE

[www.mayvillestate.edu/youthFBcamp](http://www.mayvillestate.edu/youthFBcamp)

## QUESTIONS?

[rocky.larson@mayvillestate.edu](mailto:rocky.larson@mayvillestate.edu)

## REGISTRATION INFORMATION:

\_\_\_\_\_  
Athlete's Name

\_\_\_\_\_  
Grade as of September 1, 2024

Gender:  M  F

\_\_\_\_\_  
Parent Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Home Phone

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

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Family Health Insurance Co.

\_\_\_\_\_  
Policy #

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

**Confirmation email will be sent to email address listed upon receipt of camp registration.**