

# BILL REAGAN'S **TOP GUN** QUARTERBACK TRAINING



## Quarterback Mini Camp – Hobart High School July 8, 9, 10 **Brickyard Stadium 2211 E 10th St, Hobart, IN** Small camp numbers = **BIG INDIVIDUAL GAINS**

Rising GRADES 5 – 8 \$190 (includes t shirt) 1:30pm–2:45pm (capacity - 12)

Rising GRADES 9–12 \$270 (includes t shirt) 3:00pm–4:30pm (capacity - 8)

Directed by Bill Reagan: Former University of Notre Dame Football Staff member, St. Joseph's College Head Coach, Ashland University OC & Elite 11 Regional Coach

For more information about Top Gun visit: [reagantopgunqbtraining.com](http://reagantopgunqbtraining.com)

To Reserve a spot, email [reagan.8@nd.edu](mailto:reagan.8@nd.edu) or call/text (574) 876 - 6349

Registration fee may be paid by check or Venmo @Elizabeth-Reagan-10 (cell 0276)

Checks are made out to: Bill Reagan

Mail registration/fee in care of Bill Reagan to: 51287 Carrigan Way, Granger, In. 46530

### TOP GUN QB TRAINING REGISTRATION/WAIVER FORM

CAMPER NAME \_\_\_\_\_ Cell PHONE \_\_\_\_\_

Parent Email \_\_\_\_\_ Camp Site \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SCHOOL \_\_\_\_\_ Grade \_\_\_\_\_ SESSION - Youth \_\_\_\_\_ high school \_\_\_\_\_

Adult T Shirt size \_\_\_\_\_

My son has permission to attend the TOP GUN QB ACADEMY. I certify that within the past 2 years, he has had a physical examination and that he is physically able to participate in football camp activities. I will be responsible for any medical or other charges in connection with my son's attendance at the TOP GUN QB TRAINING.

Parent (legal guardian) Signature \_\_\_\_\_

Insurance Company name \_\_\_\_\_ Policy Number \_\_\_\_\_

Are there any restrictions to participation? No \_\_\_\_\_ If yes \_\_\_\_\_ explain on reverse side: