

2025 PITTSFORD FOOTBALL SUMMER CAMP BIG CATS FLAG FOOTBALL

Grades 2nd - 6th
July 7th – July 10th
9am – 12pm

Pittsford Youth Football Camp Staff

2025 Varsity Football Players

Head Varsity Coach: Steve Marriott
Assistant Varsity Coach: Jason Bernas
Head JV Coach: Brian Tripp

Camp Information

Location:

- Pittsford Mendon High School
Varsity Football Practice Field

Eligibility:

- All Students Grades 2nd – 6th

When: July 7th – July 10th

Time: 9am – 12pm

- Summer Camp: \$100
- Max Per Family: \$175

What to Bring:

- Cleats or sneakers
- T-shirt - Shorts
- Water bottle

***All Players will receive a
Pittsford Football T-Shirt**



Payment & Contact Information

Make checks payable to:
Pittsford Football Camps

Send payments to:
Pittsford Football Camps
7 Cricket Hill Drive
Pittsford, New York 14534

For Questions: (585) 267-3489
Jason_bernas@pittsford.monroe.edu

Camp Goals

Introduce and develop the basic skills associated with football
Encourage self-confidence and a positive attitude towards the game of football
Focus on importance of sportsmanship, integrity and teamwork
Promote fun in a physical setting while focusing on learning
Games will be played in a small group format
PLAYERS WILL BE GROUPED BY AGE AND ABILITY LEVEL

Registration Process → Please Complete Registration Form – Sign Medical Release – Mail with Payment

Make checks payable to: Pittsford Football Camps

Youth T-Shirt Size: Small – Medium – Large – X-Large (Circle One)

Adult T-Shirt Size: Small – Medium – Large – X-Large (Circle One)

Player Name: _____ Parent or Guardian: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone Number: _____ E-Mail: _____
Birth date/Age: _____ Grade: _____ School: _____
Person to notify in case of Emergency: _____ Phone # _____
Family Doctor: _____ Phone # _____
Allergies/Medications: _____
Insurance Provider: _____ Policy # _____

Neither Pittsford Football nor the staff of the Pittsford Football Camps assumes responsibility for accidents or medical expenses incurred as a result of participation. All participants will assume responsibility for any medical expenses incurred. I have adequate medical coverage and insurance and give my son/daughter permission to attend the Pittsford Youth Football Camp. With this signature, I agree to indemnify Pittsford Football Camps and volunteers, from any claim which may be presented as a result of an injury to my child.

Parent/Guardian's Signature - Date