



**NOW INTRODUCES**

# **RRQB TRAINING ELITE FOOTBALL LEAGUE**

**FROM FORMER RECORD BREAKING KELLER HS QB  
& BAYLOR UNIVERSITY QB RYAN ROBERTS**

## ***SELECT YOUTH INDOOR 7 ON 7 FOOTBALL!***

***PLAYS PROVIDED FOR EACH TEAM BASED ON  
LOCAL HS & D1 COLLEGE PLAYBOOKS!***

***COACHES INSTRUCTED ON SPREAD PASSING  
ATTACK & DEFENSIVE STRATEGIES!***

***POWERFUL WAY TO IMPROVE COVERAGE  
RECOGNITION AND OVERALL DEVELOPMENT  
AS A COMPETITIVE FOOTBALL PLAYER!***

***"GAIN AN EDGE!"***

**AGE DIVISIONS:** Elite (15-16)  
Varsity (13-14)  
Junior Varsity (11-12)  
Sophomore (9-10)  
Freshman (7-8) \*coach pass  
Rookie (5-6) \*coach pass



**DATES:** April 30<sup>th</sup> - June 18<sup>th</sup>

**COST:** \$75 (individual); \$650 (team)

**LOCATION:** Blue Sky Sports Center  
Keller, TX

**RRQB TRAINING**



[www.RRQB.net](http://www.RRQB.net)

**REGISTRATION FORM ON BACK**

# RRQB TRAINING ELITE FOOTBALL LEAGUE REGISTRATION FORM

## REQUIRED INDIVIDUAL REGISTRATION INFORMATION: (ALL PLAYERS MUST COMPLETE)

NAME \_\_\_\_\_ AGE DIVISION \_\_\_\_\_ POSITION (QB, WR, RB, LB, DB) \_\_\_\_\_  
DATE OF BIRTH \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
PARENT/GUARDIAN NAME \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_  
TEAM NAME (\*IF REGISTERING W/ A TEAM) \_\_\_\_\_

## TEAM REGISTRATION INFORMATION: (COMPLETE ONLY IF REGISTERING AN ENTIRE TEAM)

TEAM NAME \_\_\_\_\_ AGE DIVISION \_\_\_\_\_

## PLAYER'S INFORMATION (must have minimum of 7)

NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____
NAME _____	AGE _____	POSITION _____

## COACH'S INFORMATION

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

## RELEASE OF LIABILITY

By signing below, I the undersigned, certify that I am the parent or legal guardian of the player listed. I release and discharge Blue Sky Sports Center and all associated parties, including the city of Keller and RRQB TRAINING, from all action, suits and demands whatsoever in law or equity, including but not limited to, the risk of personal injury from playing in the RRQB TRAINING ELITE FOOTBALL LEAGUE and the risk of loss of personal property by theft or otherwise.

Signature \_\_\_\_\_

Date \_\_\_\_\_

\*Please mail in the registration form to Blue Sky Sports Center in Keller: 331 Golden Triangle Blvd., Keller, TX 76248 or bring in person to facility. Payments can be made by mailed check written out to 'Blue Sky Sports Center' and sent to Blue Sky Sports Center in Keller, 331 Golden Triangle Blvd., Keller, TX 76248, or paid in person at Blue Sky Sports Center in Keller by way of check, cash, or credit card. If registering as an individual, the price is \$75; total team registration fee is \$650. For questions or concerns simply contact Ryan Roberts by cell at 817.343.4912 or email at [ryan\\_roberts@baylor.edu](mailto:ryan_roberts@baylor.edu). For more information, registration forms, and details visit [www.BLUESKYSPORTSCENTER.com](http://www.BLUESKYSPORTSCENTER.com) or [www.RRQB.net](http://www.RRQB.net).

## BLUE SKY SPORTS CENTER USE ONLY

AMOUNT PAID: \_\_\_\_\_ DATE PAID: \_\_\_\_\_  
PAYMENT TYPE: \_\_\_\_\_ PAYMENT TAKEN BY: \_\_\_\_\_