



**MOTIVATION – PREPARATION – DEDICATION**  
**GILBERT BROWN FOUNDATION**  
**ALL-PRO FOOTBALL CAMP**

**July 7 - 9, 2026**

**Bradley Technology & Trade School**  
**700 S 4th Street**  
**Milwaukee, WI 53204**

**MORNING SESSION**

**Tuesday – Thursday,**  
**8:30am – 12:00 noon**  
**Ages 8 – 12**  
**Lunch Provided**

**AFTERNOON SESSION**

**Tuesday – Thursday,**  
**2:00 pm – 5:30pm**  
**Ages 13 – 17**  
**Meal Provided**

**\*\*\* THIS IS A FREE CAMP OPEN TO ANYONE\*\*\***  
**NEW PARTICIPANTS ACCEPTED ALL THREE DAYS**

**CAMP SESSIONS ARE HELD RAIN OR SHINE**

**“TAKE YOUR GAME TO THE NEXT LEVEL”**

**LEARN FOOTBALL FUNDAMENTALS AND LIFE SKILLS FROM PROFESSIONAL PLAYERS**

- |                                       |                                       |
|---------------------------------------|---------------------------------------|
| ✓ WEAR A WHITE OR LIGHT COLOR T-SHIRT | ✓ NON-METAL FOOTBALL CLEATS ALLOWED   |
| ✓ NO SAGGY/BAGGY CLOTHING ALLOWED     | ✓ NO HELMETS OR SHOULDER PADS ALLOWED |
| ✓ NO BLUE JEANS                       | ✓ NO FULL CONTACT ALLOWED             |

**DAILY TRANSPORTATION TO CAMP WILL BE AVAILABLE AT  
VARIOUS LOCATIONS FOR MORNING SESSIONS**

**MILWAUKEE METRO TICKETS WILL BE AVAILABLE DAILY  
AT AFTERNOON SESSIONS**

**REGISTER ONLINE AT: <https://gilbertbrownfoundation.org/>**

**DOWNLOADABLE FORMS ARE ALSO AVAILABLE AT: <https://gilbertbrownfoundation.org/>**  
**EMAIL COMPLETED FORMS AS ATTACHMENTS TO: [Gilbert Brown Milwaukee All-Pro Football Camp](https://gilbertbrownfoundation.org/)**

**SEND BY US MAIL TO: GILBERT BROWN ALL-PRO FOOTBALL CAMP; 2301 W Vista Bella Dr.; Oak Creek, WI 53154**

**EACH PARTICIPANT MUST BE REGISTERED BEFORE HE/SHE CAN PLAY. IF PARTICIPANT HAS NOT PRE-REGISTERED, HE/SHE SHOULD BRING A COMPLETED AND SIGNED APPLICATION TO CAMP; OR A PARENT/GUARDIAN OVER 18 CAN REGISTER THEM AT THE CAMP.**

**THIS IS A DROP-IN PROGRAM. CHILDREN LEFT AFTER CLOSE OF DAILY SESSION ARE NOT THE RESPONSIBILITY OF THE GILBERT BROWN FOUNDATION/ALL – PRO FOOTBALL CAMP**

**FOR QUESTIONS OR ADDITIONAL INFORMATION PLEASE CALL: (414) 943-3366**

EACH PARTICIPANT REQUIRES A SEPARATE APPLICATION. IF SUBMITTING ELECTRONICALLY (E-MAIL), COMPLETE EACH FIELD AND SAVE A COPY OF THE FORM BY DOING A "SAVE AS", USING A DIFFERENT NAME FOR EACH FILE (FORM). SEND THE FORM(S) AS ATTACHMENT(S) TO:

[Gilbert Brown Milwaukee All-Pro Football Camp \(gbapkcamp@gmail.com\)](mailto:gbapkcamp@gmail.com)

ALTHOUGH THIS FORM IS A FILLABLE FORM, IT CAN BE DOWNLOADED AND PRINTED TO COMPLETE MANUALLY. PLEASE PRINT LEGIBLY IN ALL FIELDS AND SIGN THE APPLICATION. EMAIL FORM AS AN ATTACHMENT OR SEND BY US MAIL.

## **2026 GILBERT BROWN ALL-PRO FOOTBALL CAMP APPLICATION (JULY 7- 9, 2026)**

Participant (Last): \_\_\_\_\_ (First): \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Name MM / DD / YYYY

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_ Zip: \_\_\_\_\_ PARENT/ GUARDIAN EMAIL: \_\_\_\_\_

Participant's Medical Restrictions/Allergies: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Primary Contact Number: (\_\_\_\_) \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Contact Number: (\_\_\_\_) \_\_\_\_\_

Transportation Required (Y/N): \_\_\_\_ Child may be included in camp media (EX. videos, photos, promos) (Y/N): \_\_\_\_

### **GILBERT BROWN 2026 ALL-PRO FOOTBALL ACKNOWLEDGEMENT OF UNDERSTANDING: FOR PARTICIPANTS OF MINORITY AGE (UNDER THE AGE OF 18 AT TIME OF REGISTRATION)**

This is to certify that I, as parent/guardian with legal responsibility for the participant, have read and do consent and agree not only to his/her release but also to release and indemnify those released from any and all liabilities incident to my minor child's involvement of participation in these programs for myself, my heirs, assigns and next of kin.

Parent/Guardian's Signature \_\_\_\_\_ Date Signed \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
**AN ELECTRONIC SIGNATURE IMPLIES CONSENT BY PARENT/GUARDIAN**

NOTE: THIS FORM MUST BE READ AND SIGNED BEFORE THE PARTICIPANT IS ALLOWED TO TAKE PART IN ANY FOOTBALL CAMP ACTIVITIES AND SESSIONS. **BY SIGNING THIS FORM AND CHECKING EACH BOX, THE PARTICIPANT (PARENT/GUARDIAN) AFFIRMS HAVING READ IT.**

IN CONSIDERATION of being allowed to participate in any way in the sports and activities of the Gilbert Brown All-Pro Football Camp my involvement under the auspices of the Gilbert Brown All-Pro Football Camp/Gilbert Brown Foundation, this sponsoring organization, I acknowledge, appreciate and agree that:

- The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis, dismemberment and death and while particular rule, equipment and personal discipline may reduce the risk, the risk of serious injury does exist; as well as loss of or damage to property.
- I, knowingly and freely assume all such risks; both known and unknown, even if arising from the negligence of those releases or others, and assume full responsibility for my participation; and,
- I, willingly agree to comply with the stated customary terms and conditions for participation. If however, I observe any unusual or unnecessary hazard during my presence or participation, I will bring such to the attention of the nearest official immediately; and,
- For myself, and on behalf of my heirs, assigns, personal representatives, and next of kin, hereby release and hold harmless the Gilbert Brown All-Pro Football Camp/Gilbert Brown Foundation, their officers, officials, agents, and/or employees ("releases"), with respect to any and all injury, paralysis, dismemberment, disability, death, and/or loss or damage to person or property whether caused by the negligence of the releases or otherwise, except that which is the result of gross negligence and/or wanton misconduct.
- Emergency treatment permission: I know that Gilbert Brown All-Pro Football Camp/Gilbert Brown Foundation does not carry medical or accident insurance. My family's own health insurance must assume responsibility in the event of injury. I understand that every precaution is taken to protect the safety of each individual. I agree to emergency treatment by a physician or hospital in the event I cannot be reached.
- I, personally and on behalf of my child, hereby give releases, or any one of them, permission to use my and/or my child's name, photograph, quotations and likeness in any advertisements or promotions performed in connection with the camp and agree that neither I nor my child shall be entitled to any compensation for such use.
- I, personally and on behalf of my child, understand that the Gilbert Brown All-Pro Football Camp/ Gilbert Brown Foundation, and their representatives are not responsible for any negligent behavior that may occur while my child is participating in the camp.
- I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without any inducement.

I understand that I have the right to bargain the terms of this contract **prior** to signing it.