

## CAPITAL CITY FOOTBALL CAMP APPLICATION

(Please detach and return this portion, the consent and a check.)

Registration also available online at [capitalcityfootballcamp.com](http://capitalcityfootballcamp.com)

Name: \_\_\_\_\_

Tee Size (Circle): S M L XL XXL XXXL XXXXL

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_

Coach: \_\_\_\_\_

2026-2027 Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Phone: (C) \_\_\_\_\_ (H) \_\_\_\_\_

### Check one of the following:

- Dorms and All Meals (\$275.00)
- Day Camper and All Meals (\$230.00)
- Injured Player attending but not participating (\$240.00)

Mail to:

**Capital City Football Camp  
c/o Pat Goldhahn  
15 South Division Ln  
Fairfield, MT 59436**

\* A \$100.00 non-refundable deposit must accompany this application, and this is part of the total camp fee.

(ex. \$275 - \$100 = \$175 due at registration.)

\* A \$25.00 late fee will be assessed if the application is not received by **May 31**. (Camp Director may waive due to special circumstances.)

\* There will be a \$50 fee added to all returned checks.

## CAMP PROGRAM

Each day of the camp will begin with a 20 minute warm-up and stretch period.

Following will be an offensive session and a defensive session.

In addition, campers will participate in live scrimmages and various competitions during sessions.

A Certified Athletic Trainer will be in attendance for the sessions.

## ELIGIBILITY

This contact camp is open to the students who will be in grades 9-12 during the upcoming school year.

**Campers must have had a physical during the last year.**

\* Full football athletic equipment is required for each athlete. Each athlete is required to provide their own equipment.

## ROOM, BOARD, & FEES

Athletes will be lodged in the residence halls and will eat breakfast, lunch, and dinner in the Student Union Building.

**Linens, towels, and pillows are the responsibility of the campers to bring with them. They will not be provided. A small fan is also advisable.**

Dorms/All Meals.....	\$275.00
Day Camper/All Meals.....	\$230.00
Injured player attending & not participating....	\$240.00

**Camp Director: Pat Goldhahn - 406.855.1918**

**[pgoldhahn031768@gmail.com](mailto:pgoldhahn031768@gmail.com)**

Camp Staff: High School Coaches  
Carroll College Coaches and players

**\* We will charge \$45 for assistant coaches for meals, but their rooms will be comped.**

**One head coach per team will be comped for meals and lodging.**

# CAPITAL CITY FOOTBALL CAMP



(formerly Rimrock Football Camp)

## June 12-14, 2026

6-MAN AND 8-MAN  
Fundamental, Technique,  
Individual and Team Camp

Held at Carroll College  
in Helena, MT

[capitalcityfootballcamp.com](http://capitalcityfootballcamp.com)

## STANDARDS

Participants attending the camp must maintain standards of Carroll College (i.e. high standards of honor, integrity, language and morality; abstinence from the use of illegal drugs, alcohol and tobacco). Following are the responsibilities of each participant: maintain respectful attitudes toward faculty, coaches, staff and other individuals; attend all camp sessions, follow instructions, and respect curfew and all camp rules. Any participant involved in theft, use of alcohol, tobacco, or illegal drugs; infraction of dormitory rules, curfew, firearms of any kind, or any other unlawful act will be dismissed from camp. There will be no refunds given to those dismissed from camp due to the previous list of violations. Parents or guardians will be responsible for picking up the participant that was dismissed as well as paying for the costs incurred for transportation.

**Contact Pat Goldhahn if you have any questions about the camp or this application at 406-855-1918 or [pgoldhahn031768@gmail.com](mailto:pgoldhahn031768@gmail.com).**

## 2025 MT PLAYOFF RESULTS

### 6-Man State Championship

CJI 46 - Grass Range-Winnett 38 (2OT)

### 8-Man State Championship

Scobey 48 - Drummond-Phillipsburg 16

### Class B State Championship

Manhattan 28 - Three Forks 7

### Class A State Championship

Frenchtown 31 - Billings Central 21

### Class AA State Championship

Kalispell Glacier 16 - Billings West 3

## TENTATIVE DAILY CAMP SCHEDULE

### Friday, June 12

11:30 - 1:30 PM

1:30 - 2:15 PM

2:15 - 3:00 PM

3:00 - 4:00 PM

4:00 - 5:00 PM

5:00 - 6:00 PM

6:00 - 7:00 PM

7:00 - 7:15 PM

7:15 - 7:30 PM

7:30 - 8:30 PM

Registration

Coaches Meeting / Team Setup

Welcome / Camp Staff Introductions / Campus Overview / Standards

Team Practices (Team stretch for all teams on your own)

Individual Offensive Session / Water Break

Individual Defensive Session

Dinner in the stands

Group Photo

Helmet Safety/Proper Tackling

Team Scrimmages / JV after varsity if needed

### Saturday, June 13

7:00 - 8:00 AM

8:15 - 8:45 AM

8:45 - 9:05 AM

9:05 - 10:00 AM

10:00 - 10:45 AM

10:50 - 12:00 PM

12:00 - 1:30 PM

1:30 - 2:15 PM

2:15 - 3:30 PM

3:30 - 4:50 PM

5:00 - 6:30 PM

6:30 - 8:00 PM

Breakfast

Everyone in the stands - College Recruiting and Requirements

Team stretch on the main field

Individual Offense / Water Break

Individual Defense

Official Team Scrimmages / JV after varsity if needed

Lunch

Stands - Carroll College Players - Guest Speakers

3 on 3 Competition (Modified 2 reps for complete competition)

Team/Individual Competitions

Dinner

Official Team Scrimmages / JV after varsity if needed

### Sunday, June 14

7:00 - 8:00 AM

8:15 - 9:15 AM

9:15 - 9:30 AM

9:30 - 10:05 AM

10:05 - 10:35 AM

10:40 - 12:00 AM

12:00 - 1:00 PM

1:00 - 1:20 PM

1:20 - 2:00 PM

2:00 - 3:30 PM

3:30 - 4:45 PM

Breakfast

In the stands

Team Stretch on the main field

Individual Offense / Water Break

Individual Defense

Official Team Scrimmages / JV after varsity if needed

Lunch

Camp Awards in the stands

MSU Bobcat Players - Guest Speakers

"The Capital City Shootout"

Checkout

## CONSENT FORM

I undersigned, being a parent or legal guardian of the child requesting camp admittance, does hereby affirm that the applicant is in good health, and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved.

Furthermore, the undersigned has no knowledge of any reason the applicant cannot participate in vigorous physical activity. The undersigned expressly agrees to be responsible for any medical bills incurred for the treatment of any illness or accident. In the event of any such accident or injury, I hereby consent to allow any of the camp supervisors to provide any medical treatment deemed advisable on my behalf of my child or the ward without prior consent.

I understand that, as a condition of admittance as a camper, the undersigned, on behalf of all the parents and guardians, and on behalf of the applicant, hereby release **CARROLL COLLEGE, ANY AND ALL COACHES, SUPERVISORS AND EMPLOYEES OR AGENTS OF THE CAMP** from any and all liability from injury or illness, mental or physical, suffered by the camper during or related to the camp, unless caused by willful act or gross negligence by the person entity against whom the claim is made.

This is the \_\_\_\_\_ day of \_\_\_\_\_, 2026.

Applicant's Name

Parent/Guardian Signature