

#### **DABOSWINNEYFOOTBALLCAMP.COM**

Name:			Gender:			
Address:						
		State:		Zip:		
HOME PHONE:		WORK	C	ELL:		
Email Addres	s:					
Emergency Contact:		Emergency Phone:				
Pick-Up Person #1		permission to pick-up the camper from camp: Cell Phone Cell Phone				
Grade Entering Grade (FALL 2019)						
Football Posit	ion (5 <sup>th</sup> Grade	& Older)				
T-Shirt Size:		Roommate Request:				
	<u>CIRCLE CAN</u>	MP SESSION C	AMPER WISHES TO	ATTEND		
SESSION:			HIGH SCHOOL 1& HS Kicking Camp (June 4-6)			
CAMP COST						
YOUTH	<u>CAMP</u> : \$235					
PLEASE (	CIRCLE RESIDEN	T OR COMMUTE	R FOR THE HIGH SCHO	DOL CAMP		
HIGH SCHOOL CAMP:		\$375 RES	IDENT \$29	5 EVENING COMMUTER		
			ly)- Large Pizza/Drink pro	ovided each night in the dorms I camp total.		

#### PAYMENT

### NO PERSONAL CHECKS WILL BE ACCEPTED

Accepted Methods of Payment: Cash, Credit Card, Money Order

Credit Card Choice:	Master Card	Visa	Discover	
CC #:			Expiration Date:	
Name on Card:		Security Code:		
CC Billing Address				

Money Orders must be written to C.U.A.D. (Clemson Univ. Athletic Dept.)

Money Order number:\_\_\_\_\_

# **REFUND POLICY**

## \*\*After May 1<sup>st</sup>, \$100.00 of the camp cost is NON-REFUNDABLE

Cancellation Requests must be submitted to the following numbers:

Jennifer Benton – Camp Assistant (864) 656-9483 or FOOTBALL-L@CLEMSON.EDU Ren Windham – Camp Assistant (864) 656-0609 or FOOTBALL-L@CLEMSON.EDU

> Dabo Swinney Football Camp PO Box 1585 Clemson SC 29631