



Group Rates

<u>Youth Camp</u>	
# of Campers	Cost
5-9	\$215
10-14	\$210
15-19	\$205
20+	\$200

<u>High School Camp</u>		
# of Campers	Resident	Evening Commuter
5-9	\$355	\$275
10-14	\$345	\$265
15-19	\$335	\$255
20+	\$325	\$245

1. Designate One (1) contact person for your group. Please only allow this person to communicate to the camp.
2. Print out & complete the "Group Roster Form". Email the form immediately to Jennifer Benton (jennifi@clemsn.edu) so we can begin making plans for the number of campers that will be in attendance.
3. Print out the "Group Registration Form". Make a copy for each camper in your group and have that camper fill out the forms. The Group contact should collect all registration forms and all payments. The group contact will turn all of this information in at the same time.
4. After collecting all of the necessary forms & payments, please contact Jennifer Benton (jennifi@clemsn.edu, 864-656-9483).
5. **ALL FORMS (Application, Medical History Form, Copy of the Insurance Car, Physician's Statement, and Waiver) MUST BE TURNED IN A WEEK BEFORE THE CAMP BEGINS**
6. Any questions, please contact Jennifer Benton (jennifi@clemsn.edu, 864-656-9483)

By registering for this camp, I do hereby grant permission to the Dabo Swinney Football Camp, LLC program and its employees or representatives, to take and use: photographs, video and/or digital images of my child for use in promotional or educational materials pertinent to the Dabo Swinney Football Camp program.

PLEASE COMPLETE THE CAMPER ROSTER ON PAGE 2

