

LIABILITY RELEASE

My son has permission to participate in the Dumas Demon Football Camp. I have no knowledge of any physical impairment that will be affected by my son's participations in the Demon Football Camp. In the event of any emergency in which my son requires medical care, I authorize the staff of the Dumas Demon Camp to act for me to obtain for my son whatever medical treatment the staff, in their best judgment deems necessary and appropriate. I specifically waive, give-up, and release the Dumas Demon Camp, Dumas Independent School District, and any staff member from liability for any claim for damages, which my son or I may have for injuries, or illnesses that he may sustain at the Dumas Demon Camp.

This is to certify my child,

Date _____

Parent/Guardian's Signature

Send or bring by this application and fee to:

Dumas Demon Athletic Office
P. O. Box 615
Dumas, TX 79029



DEMON STRONG

DUMAS DEMONS

2017

Little Demon Football Camp

Dear Demon:

On behalf of the entire Demon coaching staff, I would like to invite you to the Demon Football Camp at Dumas Stadium for 2017. We look forward to working with you and introducing you to the special Demon Tradition.

The Demon Football Camp will be an opportunity for you to learn and enhance the fundamentals and skills necessary for football. More importantly, you will gain a better understanding of the importance of character, class, teamwork, leadership, and the role these traits have in becoming a football player. In addition, this camp will provide an opportunity for you to work with and build a relationship with our current High School players that will be assigned as staff members.

We are excited about the future of Demon Football and hope you will join us in laying a solid foundation for years to come.

Coach Chad Dunnam

CAMP INFORMATION

Dates of Camp: Monday July 31st
- Thursday August 3rd

Times: 9:00 A.M. - 11:00 A.M.

Grades: Incoming 1st - 6th Graders

COST

****\$25.00**

**CHECKS SHOULD BE MADE
PAYABLE TO:**

Dumas Quarterback Club



LOCATION

All campers should be dropped off
and picked up at Demon Stadium.

**Financial Aid will be available

SIGN UP

Early registration will begin May
8th and will go through July 30th.
The registration form can be
returned to the high school athletic
office or mailed to:

Dumas High School Athletic Office
P. O. Box 615
Dumas, TX 79029

**Early registration is important to
insure correct T-shirt size.**

***Onsite Registration/Late
Registration \$25.00**

NEEDED EQUIPMENT

Campers should wear rubber cleats, if
possible and should wear shorts. A
camp T-shirt will be provided and should
be worn each day of camp. Hats and
sunscreen are also highly
recommended. Water will be provided.

**FOR FURTHER INFORMATION,
PLEASE CALL:**

(806) 935-2523 Ext. 2001

LITTLE DEMON Football Camp 2017

REGISTRATION FORM

Name: _____

Address: _____

School Attending _____

Grade Level Next Year: _____

T-Shirt Size (Please circle):
ADULT - S M L XL XXL

YOUTH - S M L XL

PARENT/GUARDIAN: _____

HOME PHONE: _____

EMERG. PHONE: _____

**PLEASE DESCRIBE ANY MEDICAL PROBLEMS
THAT SHOULD BE BROUGHT TO THE ATTENTION
OF THE STAFF:** _____
