Eric Nash is in his 14th year coaching at Wofford as the offensive line coach. He also played football at Wofford from 1998-2002.

Coach Eric Nash

Eric Nash - (864)316-5365
nashem@wofford.edu

June 6 - 9, 2016
9:00am - 1:00pm

Boys & Girls
Ages 5-13

For questions or more information please contact:

Eric Nash - (864)316-5365
nashem@wofford.edu
**Football and Fun**

**Instructions:**

We teach fundamentals through team competition, group instruction and individual attention. We teach these skills in a safe and fun atmosphere. We will develop skills on offense and defense through non-contact drills. We try to give each camper a better understanding of the fundamentals and game of football.

**Camp Store:**

Our camp store will allow for the purchase of sports drinks, snacks and pizza. An account may be set up in the camp store.

**Facilities:**

The Eric Nash Youth Football Camp will be held on the Wofford campus. The campers will compete on the same fields as the Wofford Terriers and the NFL’s Carolina Panthers.

**Additional Brochures or Information:**

Eric Nash - nashem@wofford.edu or (864) 316-5365

**June 6-9**

**Camp Details:**

This is a non-contact day camp open to boys and girls ages 5-13. Practice sessions will be conducted in t-shirts and shorts. Football cleats and sunscreen are recommended.

The cost of the camp is $150. Included in the camp tuition are four sessions of individual instruction, at least 2 games each day, and a camp t-shirt. Full tuition is requested with each application.

**Daily Schedule:**

- **8:45am** Drop-off
- **9:00am** Speed and Agility Training
- **Individual Fundamentals**
- **Group Work - Obstacle Course, Relays, etc.**
- **Team Competition**
- **1:00pm Pick-up**

**YOUTH CAMP REGISTRATION**

A current email address is critical for confirmation. Please mail the completed forms with a check made out to:
Eric Nash Youth Football Camp
429 North Church Street
Spartanburg, SC 29303

**Camper’s Name** _____________________ **Age** _____ **Grade** ________

**Parent’s Name** ____________________________________________

**Home Address** ____________________________________________

**City** ___________________ **State** ______ **Zip** __________

**H Phone** ___________   **C Phone** ___________

**EMAIL** ____________________________________________

Youth t-shirt size: YS (6-8)  YM (10-12)  YL (14-16)
Adult t-shirt size:  S       M       L      XL  Circle one

**Enclosed payment:** ( ) $150

**Do you play for a Youth Team or Association:** ( ) Yes or ( ) No

If Yes, what Youth Association do you play for?

**Medical Form**

Note: Your insurance will be the primary source for coverage if your child is injured. The camp insurance policy is a secondary policy.

**Insurance Co.** ____________________________________________

**Policy Holder** ____________________________________________

**Policy Number** ____________________________________________

**Physician’s Name** __________________________________________

**Physician’s Phone** __________________________________________

Any known allergies, illnesses, or injuries ____________________
____________________________________________________________________
____________________________________________________________________

**Date of last Tetanus booster** ______________________

This will certify that I am the legal guardian for the above camper and that he/she has had an adequate medical examination within a one year period from a certified healthcare professional, and is physically able to participate in the activities of the Eric Nash Youth Football Camp. I have also made known to the Eric Nash Youth Football Camp any medical, physical or mental ailments that might limit or exclude the camper from any camp activities. By applying for acceptance as a camper, I hereby waive, release, indemnify and hold harmless the Eric Nash Youth Football Camp and its employees for any damages that the aforementioned camper may incur and do waive all rights and claims arising therefrom. Such injuries include but are not limited to broken limbs, concussions, contusions, and heat stroke. I further release and hold the Eric Nash Youth Football Camp harmless from any injuries sustained in camp or on the way to and from camp.

In addition, I hereby state that the Eric Nash Youth Football Camp is not responsible for any pre-existing illness or injury of the above camper prior to the first day of camp. I understand that the camper is assuming all risks associated with the sport of football that may affect such pre-existing conditions or injuries. I give my written permission for the above camper to be treated by a medical doctor if deemed necessary by trainers or coaches responsible for the Eric Nash Youth Football Camp’s operation.

**Parent/Guardian Signature** ______________________________________

**Emergency Phone** ____________________________________________

**Date** ______________________________________________________