

HEAD COACH FORM

"IN IT TO WIN IT"

What is needed for this team camp: Some football equipment including helmet, shoulder pads, mouthpiece, cleats, t-shirts and shorts. Coaches please bring footballs and medical equipment. GRADE LEVEL IS 7TH THROUGH 12TH

The **EPIC FOOTBALL CAMP Football Schedule** will be handed out just prior to the camp listing the activities for the session as coordinated by the advising coaches.

EPIC FOOTBALL CAMP will lease facilities as required by the hosting school district. This camp is a one day commercial Quarterback and Wide Receivers camp through Head Coach Jeremy Epp and Scott Trimble. Please Contact Jeremy Epp at 308-520-0259 or Scott Trimble at 308-764-9994 for more information on this commercial camp or by email epicfootballcamps@gmail.com.

Warning: The purpose of the warning is to bring to your attention the existence of potential dangers associated with athletic participation. Participation in any athletic activity may range from minor cuts, bruises, sprains, and muscle strains to more serious to the body bones, joints, ligaments, tendons, and muscles, to catastrophic injuries to the head, neck and spinal cord. On rare occasions, injuries can be so severe as to result in total disability, paralysis or death.

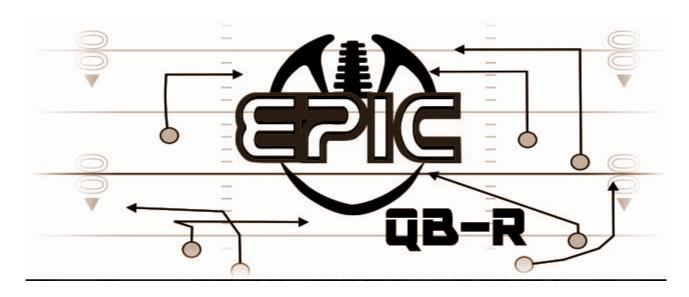
Head Coach Pre-Registration Form

EMAIL TO: EPICFOOTBALLCAMPS@GMAIL.COM WEB: WWW.EPICFOOTBALLCAMPS.COM

Head Coach Name:	School:	
Cell Phone:	Email:	
Quarterbacks: Wide Receivers:	Lineman: GRADE LEVELS: 7 TH THROUGH 12 TH	
Circle Camp(s): QBR KEARNEY NE , OLINE-DLINE KEARNEY NE June 17		
Approximate number of student athletes attending camp(s)		
Number of Coaches Attending: (limit 2 per scho	ol)	

Instructions:

- 1. Have Student Athletes Complete both policies dealing with waivers and registration
- 2. Make checks payable to EPIC FOOTBALL CAMP in the amount of \$70.00 per player. No Discounts Apply
- 3. **Return information above by email or mail** to Epic Football Camps
- 4. Deadline: Please have registrations and money POSTMARKED BY MAY 25 for JUNE camps. (all money and student waivers should be sent to Jeremy Epp)
- 5. Address: Epic Football Camps: Jeremy Epp, PO BOX 617 ALMA NE 68920
- 6. Example of medical release and waiver is found below (all athletes must complete and sign before participating) We do allow seventh grade through twelve grade student athletes.
- 7. Please make copies of Registration to hand out to all participants.
- 8. Please email if you have guestions.
- 9. Registration covers all necessary insurance, the noon meal, t-shirt, training staff and referees!
- 10. This ACADEMY is multiple stages of Quarterback and Wide Receiver development in one day. This camp provides top notch quarterbacks and wide receivers that have coached and played at the D-II level and above. The format for the day is placed in stages that develop your student athlete to have a better understanding of QB and WR play.
- 11. This is an individual commercial camp with drills, development, stations and evaluation. The format is broken into levels for the OFFENSIVE LINE and DLINE PLAY.
- 12. DATE: Listed above.
- 13. CHECK-IN is at 12:30 PM for the QBR and OLINE camp at KEARNEY CATHOLIC High School
- 14. Camp will be from 1:00 PM to 5:00 PM for the QBR and OLINE and DLINE
- 15. Information is emailed to the head coach not to players.
- 16. Coaches please bring Football Helmets and Shoulder Pads, footballs and medical equipment.
- 17. Remind players to choose the proper shirt size.
- 18. ANY REGISTRATIONS not received 10 DAYS before the camp dates are considered late and registration per camper is NOW \$80 dollars per player. Registrations the day of the camp are difficult with catering, t-shirts, insurance, teams and competitions, etc. Please respond quickly and get registration in the mail and on time.
- 19. LIMITS—DUE TO THE AMOUNT OF REPS AND COACHES. There will be a limit on the first 100 REGISTRATIONS FOR THIS CAMP. THANKS!



Student Athlete Form "IN IT TO WIN IT"

Please **pre-register** your QUARTERBACK WIDE RECEIVERS or LINEMAN through your high school head football coach. Return this form promptly to your head coach and staple a check to this form for \$70 to EPIC FOOTBALL CAMPS.

What you will need for this team camp: All football equipment including helmet, shoulder pads, mouthpiece, cleats, t-shirts and shorts.

The **EPIC FOOTBALL CAMP Football Schedule** will be emailed to your coach for June coordinated by the advising coaches. Multiple facilities will be rented and be hosting the **EPIC FOOTBALL CAMPS**. This camp is a one day individual commercial camp through Head Coach Jeremy Epp and Scott Trimble. Please Contact us at 308-520-0259 or 308-764-9994 for more information on this commercial camp or by email: epicfootballcamps@gmail.com.

Warning: The purpose of the warning is to bring to your attention the existence of potential dangers associated with athletic participation. Participation in any athletic activity may range from minor cuts, bruises, sprains, and muscle strains to more serious to the body bones, joints, ligaments, tendons, and muscles, to catastrophic injuries to the head, neck and spinal cord. On rare occasions, injuries can be so severe as to result in total disability, paralysis or death.

Visit www.epicfootballcamps.com for more information and to find us on FaceBook and Twitter!

Please retain this copy for your records.

Student Athlete Pre-Registration Form EPIC INDIVIDUAL CAMPS

Name:	Grade:	
Address:	School:	
City:	Phone:	
Check one of the following: QUARTERBACK:	_ WIDE RECEIVER:	LINEMAN:
Circle T-shirt size: SM MED LG XL	2XL 3XL	
Circle Camp(s): KEARNEY, NEBRASKA TUE CHECK-IN 12:30 PM, CAM		
 Student Athletes must complete policies belo Make checks payable to EPIC FOOTBALL CAMI Return information signed and ready for your Deadline: Please give forms to your head coac Please SIGN BELOW BOTH PARENT AND PLAY MEDICAL RELEASE AND WAIVER	P in the amount of \$70. high school football coach by MAY 25^{TH} .	00 per player and give to your head coach. ch.
and his/her parents Football Camps from all claims which may result from above stated is participating in the Football Camps. I have been the full contact football. I know of participation in such a program and my child has been the past 12 months.	injuries , serious illness, hereby certify that no physical impairment	is physically s which would in any manner limit his
ADDITIONAL MEDICAL RELEASE		
We, the undersigned parents and guardians of	elect hospital facilities ar nt such treatment becon on for him to participate	nd, or a physician and authorize treatment nes necessary as a result of the
Parent/Guardian Signature		
Athlata's Cignatura		

Please complete the medical release and waiver information completely before handing it to your head coach.