

**Physical Notice (required to attend camp):**

**Parental Consent**

Before medical treatment can be administered to minors, the law requires parental/guardian permission. As parent or guardian, you are asked to sign the following consent form that will allow medical treatment to be administered promptly should the need arise. Except in emergencies, no medical treatment will be provided without first contacting the parent or guardian to inform you of the situation.

As the minor's parent or guardian, I have actual knowledge and appreciate that there are risks of bodily injury including, but not limited to, cuts, broken bones, muscle strains/sprains, concussions, and heat-related conditions and injuries that may arise from one's participation and I hereby voluntarily consent and assume all risk of possible physical injury, including death, arising therefrom.

X \_\_\_\_\_  
Signature Relationship

**Release & Waiver of Claims**

In consideration of my child/dependent being permitted to attend and participate in football camp activities, I, FOR MYSELF, MY CHILD/DEPENDENT, MY HEIRS, AND PERSONAL REPRESENTATIVES, DO HEREBY WAIVE, RELEASE, AND DISCHARGE FOREVER ANY AND ALL CLAIMS FOR DAMAGES FOR BODILY INJURY OR DEATH OR DAMAGE OR LOSS OF PROPERTY, THAT I OR MY CHILD/DEPENDENT MAY HAVE OR THAT MAY ACCRUE SUBSEQUENTLY TO ME OR TO MY CHILD/DEPENDENT AGAINST SOUTHERN METHODIST UNIVERSITY (THE "UNIVERSITY") AND/OR JUNE JONES SMU FOOTBALL CAMP, LLC (THE "CAMP") AND THEIR TRUSTEES, OFFICERS, EMPLOYEES, MEMBERS, AND AGENTS ARISING FROM OR ATTRIBUTABLE TO MY CHILD/DEPENDENT'S ATTENDANCE AT AND PARTICIPATION IN FOOTBALL CAMP ACTIVITIES. Further, I hereby give the University and/or the Camp and their agents and representatives permission and a release to use as necessary my child's/dependent's name and photograph to promote and advertise the football camp for a period of two years after the date of this release, unless revoked by me in writing. I have read, or have had read to me, this release and waiver of claims statement and understand and voluntarily agree to its provisions.

X \_\_\_\_\_  
Signature of Parent/Guardian Date

Child's/Dependant's Name and Telephone Number \_\_\_\_\_

**Medical History**

(To be completed by parent/guardian)

- Is there known history of:
- A. Birth Deformities (one eye, one kidney) etc. Yes No
  - B. Medical Conditions currently under treatment Yes No
  - C. Pre-existing injury currently under treatment Yes No
  - D. Fractures or other disability Type injuries Yes No
  - E. Allergy (drug, food, asthma, etc.) Yes No
  - F. Mental Disorder Yes No
  - G. Known past illness of more than one week's duration Yes No
  - H. Contacts or glasses Yes No

Explain above questions answered "Yes"  
\_\_\_\_\_  
\_\_\_\_\_

I hereby state that Southern Methodist University and/or June Jones SMU Football Camp, LLC, their trustees, officers, employees, members, and agents are not responsible for any pre-existing injury or reoccurrence or aggravation of any undisclosed pre-existing injury or illness of the above camper.

X \_\_\_\_\_  
Signature of Parent/Guardian Date

**Medical Statement - Required**

Attach a copy of your previous years football physical to this form OR have your physician fill out the following medical statement.

**Physician's Statement**

I hereby certify that I have examined \_\_\_\_\_ and found him physically fit to attend and participate fully in the June Jones SMU Football Camp, and I know of no impairments which would limit his participation in football camp activities.

Comments \_\_\_\_\_

Date of last Tetanus immunization \_\_\_\_\_

Date Examined \_\_\_\_\_

Physician \_\_\_\_\_

Are you currently taking any medications?  
\_\_\_\_\_  
\_\_\_\_\_

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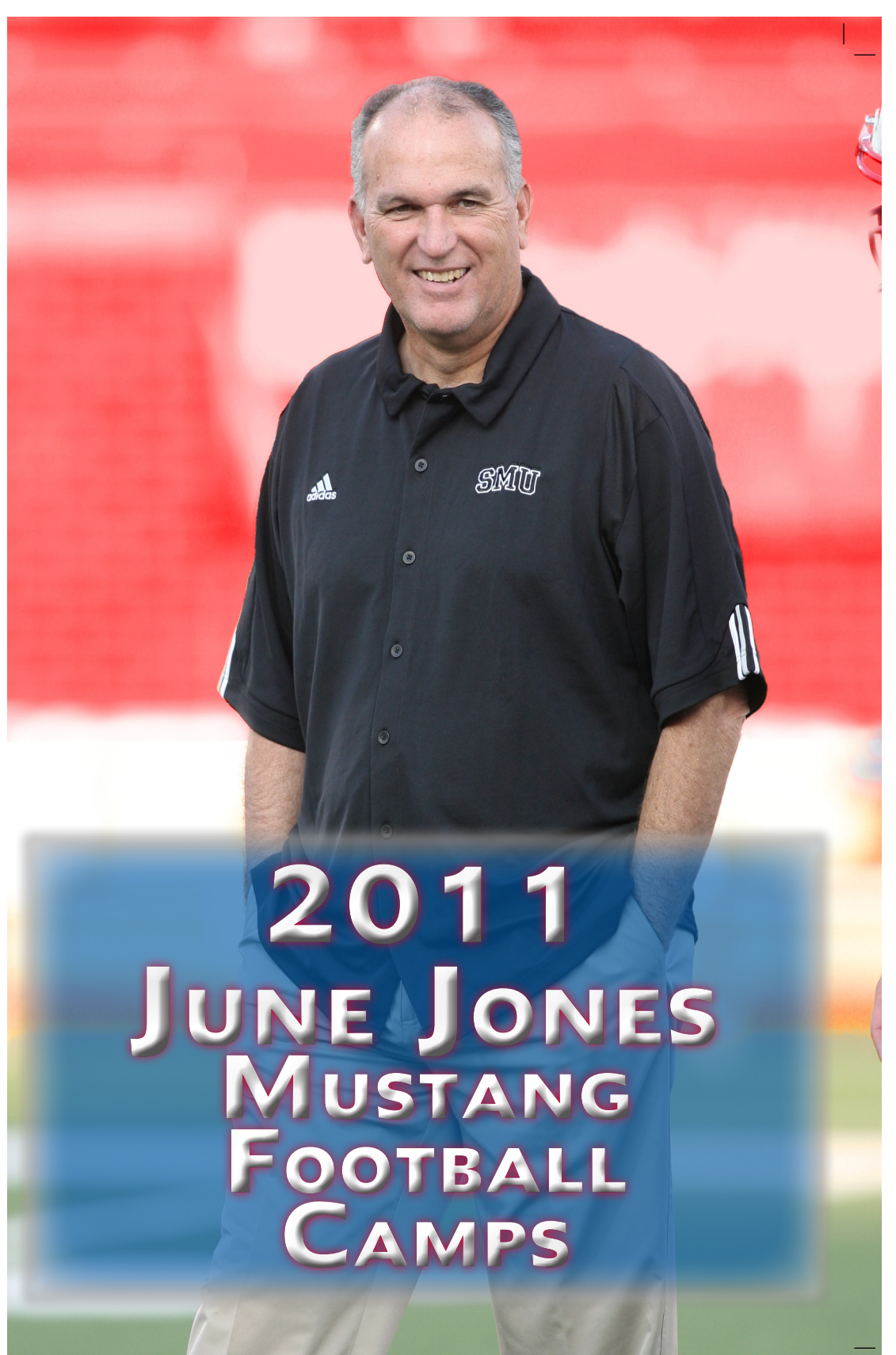
Comments \_\_\_\_\_

Date of last Tetanus immunization \_\_\_\_\_

Date Examined \_\_\_\_\_

Physician \_\_\_\_\_

Are you currently taking any medications?  
\_\_\_\_\_  
\_\_\_\_\_



## OBJECTIVE

This camp will be an NFL combine-type workout. Campers will receive individual instruction and will be evaluated by each coach based upon their testing and demonstrated ability during the drill period of the camp.

DAY	DATE	CITY	TIME	LOCATION	AGE GROUP
Thursday	June 2nd	Kilgore	5:00-8:00	Kilgore HS	11th and 12th
Saturday	June 4th	Dallas	10:00-1:00	SMU	11th and 12th
Sunday	June 5th	Dallas	10:00-1:00	SMU	11th and 12th
Monday	June 6th	Houston	9:00-12:00	Pearland HS	11th and 12th
Monday	June 6th	Houston	2:00-5:00	Cypress Falls	11th and 12th
Tuesday	June 7th	San Antonio	10:00-1:00	Alamo Heights	11th and 12th
Wednesday	June 8th	Austin	1:00-4:00	Kelly Reeves Athletic Complex	11th and 12th
Thursday	June 9th	Abilene	10:00-1:00	Abilene	11th and 12th

**ADDRESSES:** Kilgore HS-711 North Longview Street -- Kilgore, Texas 75662  
 SMU-5800 Ownby Drive -- Dallas TX 75275  
 Pearland HS-3775 South Main Street, Pearland, TX 77581  
 Cypress Falls-9811 Huffmeister Road-- Houston, TX 77095  
 Alamo Heights HS-150 E. Fair Oaks Pl -- San Antonio, Texas 78209  
 Kelly Reeves Athletic Complex-10211 West Parmer Lane -- Austin, TX 78717  
 Shotwell Stadium-1525 E. S. 11th St -- Abilene, Texas 79602

## CAMP TUITION

The tuition for the one-day mini-camp is \$40 per participant. The tuition includes a workout shirt, insurance, and instruction from the SMU coaching staff.

## PHYSICAL REQUIREMENT

Each camper **must have** a physician's statement or a previous year's physical in order to attend the camp.

## WHAT TO BRING

Camper should wear a T-shirt, shorts, socks, and a pair of tennis shoes. Also, a pair of cleats is recommended for the drill portion of the camp. (Please come dressed and ready to workout)


## TRAINERS

The SMU training staff will be on duty at all times during each camp.

## COACH JONES:

"On behalf of our program, our coaches, and our players, I want to invite you to attend one of our mini-camps this summer. At our mini-camp, you will have a chance to showcase your skills and get instruction from the SMU football staff. We hope that bringing our camps to various sites in Texas will allow more student-athletes the opportunity to spend time with our staff. My staff and I look forward to seeing you this summer."

Sincerely,



Per NCAA rules, all sports camps and clinics conducted by Southern Methodist University are open to any and all entrants. Enrollment is only limited based on age, grade level, gender, or number restrictions as specified by each camp.

For any additional information - please contact **Shay Taylor:** srtaylor@smu.edu or call 214-768-3667

## APPLICATION

Name: \_\_\_\_\_ D.O.B \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Camper Cell: \_\_\_\_\_

High School: \_\_\_\_\_ High School Coach: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Parent/Guardian's Names: \_\_\_\_\_

Parent/Guardian Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Offensive Position: \_\_\_\_\_ Defensive Position: \_\_\_\_\_

Pd. By: \_\_\_Check \_\_\_\_\_Check # \_\_\_Cash

Full payment is due at time of application and is non-refundable.

No partial payments accepted.

Please make checks payable to June Jones Football Camps.

To enroll, tear off this portion, complete, and send along with full payment to:

June Jones Football Camps • 5800 Ownby Dr. Suite 207  
Dallas, TX 75275

Registration Deadline is May 15, 2011

## PLEASE CIRCLE THE SESSION YOU WILL ATTEND:

Kilgore Camp:	June 2	Kilgore, TX	\$40.00
SMU Camp:	June 4	Dallas, TX	\$40.00
SMU Camp	June 5	Dallas, TX	\$40.00
Pearland HS Camp	June 6	Houston, TX	\$40.00
Cypress Falls Camp	June 6	Houston, TX	\$40.00
Alamo Heights Camp	June 7	San Antonio, TX	\$40.00
Kelly Reeves Camp	June 8	Austin, TX	\$40.00
Abilene Camp	June 9	Abilene, TX	\$40.00