

Nashoba Football Youth Clinic

Saturday August 26th – 10:00-12:00 – Sign in starts at 9:30
@ Nashoba Regional Turf Field



Cost: \$30.00 per player (open to players entering grades 5-8)

Make Checks Payable to Nashoba Athletics Boosters Club (NABC)

Send Registrations to: Jamie Tucker, Football Coach, Nashoba Regional HS,
12 Green Rd, Bolton, MA 01740

2015 Division 2 State Champions

Clinic Staff:

- Jamie Tucker, NRHS Head Coach
- Nashoba Football Assistant Coaches
- Current NRHS Football Players

Other Information:

- Players of all experience levels welcome!
- Non-contact, skills oriented camp!
- Players should bring their own cleats & water

Name: _____ Age: _____ Grade Entering (circle): 5 – 6 – 7 – 8

Address: _____ Phone: _____

City, State, Zip: _____

T-Shirt Size (circle one): Adult S, Adult M, Adult L, Adult XL (cannot guarantee t-shirt if not pre-registered)

Medical Concerns/Allergies: _____

In case of emergency, notify (name/#): _____

(Name of participant) is physically fit to participate in the activities of the Nashoba Football Youth Clinic. In the event of any medical emergency where representatives of the camp are unable to contact a parent or guardian of the above participant, I authorize the camp personnel to act in my child's best interest and render any necessary treatment, including hospitalization if necessary. I understand that the Nashoba Football Youth Clinic does not provide medical insurance for participants. In consideration for the athlete's participation in and enjoyment of the Chieftain Football Youth Camp, instruction and facilities, I waive, release and forever discharge the clinic, its coaches, directors, agents, promoters, and employees, Nashoba Regional HS and the town of Bolton, its ofcers, directors, agents, promoters, and employees from any responsibility from any and all liability, claim, loss, rights of action, or for accidents and medical or dental expenses present or future, anticipated or unanticipated, resulting from or arising out of or in incident to participation in this clinic. I waive and release Nashoba Football Youth Clinic and the town of Bolton and Nashoba Regional HS from any responsibility for possessions lost or damaged by weather, water, fire, theft or personal negligence or any injury or illness incurred while at the clinic or traveling to and from any clinic activity. Signature: _____

Date: _____

Insurance Company: _____ Policy #: _____