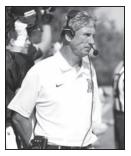
CAMP OWNERS AND DIRECTORS



DICK DULLAGHAN

Ben Davis High School (Retired) Indianapolis, Indiana

- National HS Hall of Fame
- Indiana Football Hall of Fame
- Butler U. Athletics Hall of Fame
- Career W/L Record 313 58 = 84%
- Eight Indiana State Championships
- Collegiate Coaching 4 years Purdue + Army
- Twelve Time "IFCA Coach of the Year"
- Sent over 200 players to College FB
- National FB Foundation Distinguished Amer. Award
- USA Football Clinic Director 10 years
- Coached 10 NFL or CFL Players
- Camp Owner/Director/Clinician 40 years



BILL LYNCH

DePauw University Head Coach

- Indiana Football Hall of Fame
- · Butler U. Athletics Hall of Fame
- Thirty-Eight Years Collegiate Coaching Experience
- Collegiate Head Coach 22 years
- As Head Coach Led 3 programs to Post Season/Bowl Games
- Eight Years Big 10 Coaching Experience
- Twelve years Mid-American Conference Experience
- Head Coach in Big 10, Mid-American, Div. II and Div. III
- National FB Foundation Distinguished Amer. Award
- Over 125 Collegiate Wins
- Coached over 25 NFL Players
- Camp Owner/Director/Clinician 38 years

PRESURIED SID US POSTAGE PAID INDIANAPOLIS IN PERMIT 9395



HIGH SCHOOL SKILLS CAMPS DOWN AND DIRTY LINEMAN CAMPS HIGH SCHOOL TEAM CAMPS KICKING SCHOOL

GRADES 9-12 (FALL 2017)



AMERICA'S LARGEST FOOTBALL TECHNIQUE CAMPS

EQUIPMENT (WHAT TO BRING TO CAMP):

- Helmet and Shoulder Pads Required No rental
- Inflated Football for QBs
- Knee Pads for QBs
- Mouthpiece
- Football Shoes (Broken In)
- Tennis Shoes
- Sweatshirt, Socks, Shorts, T-Shirts
- Alarm Clock
- Soap, Towels
- Pillow, Twin Sheets, Blankets

REGISTRATION AND PICK-UP:

Check in between noon and 1:30 PM (No lunch served on check in day). Pick up at 3:30 PM on last day of camp.

\$20 cash Key Deposit due at check-in.

Check in for 1-Day Team Camp and 1-Day Kicking School will be from 8:00-9:00am. Pick up at 9:00pm at the practice fields.

INQUIRIES:

Related to registration, payment or housing: **Katelyn Lynch** — email: katelynch7712@gmail.com
call or text: 765-748-8208

Related to football:

Dick Dullaghan — call or text: 317-670-9848 **Bill Lynch** — call or text: 812-679-8125

DO NOT CALL COLLEGES

Visit our website to see what a typical camp day looks like!

CAMP APPLICATION — fill out and send to address below or register online now: www.BISHOPDULLAGHAN.com

CHOOSE CAMP: (Check one or more)				
 ★ HIGH SCHOOL SKILLS CAMP LOCATION 1 DePauw University GREENCASTLE, IN 2 DePauw University GREENCASTLE, IN 	DATE June 20-22		DISCOUNTS 10 or more \$265 \$265	
DOWN AND DIRTY LINEMAN LOCATION ☐ 1 DePauw University GREENCASTLE, IN ☐ 2 DePauw University GREENCASTLE, IN	DATE June 20-22		10 or more \$265 \$265	
 ★ HIGH SCHOOL TEAM CAMPS LOCATION	DATE June 12-14	FEE \$250 \$250		
 ★ HIGH SCHOOL 1 DAY TEAM CLOCATION 1 DePauw University GREENCASTLE, IN 	DATE	FEE \$75		
 ★ HIGH SCHOOL KICKING SCH LOCATION 1 DePauw University GREENCASTLE, IN 	DATE	FEE \$100		

DO NOT STAPLE CHECKS TO APPLICATIONS

PAYMENT: DUE BY JUNE 1

Full payment must be postmarked by June 1. Applications with full payment will be accepted after this date only until camp is full. For HS Skills and Down and Dirty Lineman camps, fee includes room, board (as much as you can eat), instruction, film study and a camp practice jersey. For HS Team Camps, fee includes room, board (as much as you can eat), instruction and film study.

Make check payable to:

Bishop-Dullaghan Football Camp, Inc.

Mail application and deposit to:

Bishop-Dullaghan Football Camps, Inc.

P.O. Box 780

Greencastle, IN 46135

Full refund (minus \$40 handling fee) if cancellation is made prior to June 1. An \$80 handling fee is charged if cancellation is made after June 1, but prior to the start of camp. NO REFUNDS WILL BE MADE FOR ANY REASON AFTER CAMP STARTS.

Name		Grade ((Fall of 2017)
Address	City		StateZip
Home Phone: ()	Email		(please print legibly
Coach's Name		School	
Roommate Preference (Roommate re	equest not quaranteed)		

My son has my permission to attend The Bishop/Dullaghan Football Camp. I have no knowledge of any physical impairment that would affect my son's participation in the B/D Camp program. In the event of any emergency in which my son requires medical care, I authorize the staff of the B/D Camp to act for me to obtain for him whatever medical treatment the staff in its best judgment deems necessary and appropriate. I specifically consent to such treatment including but not limited to hospitalization and surgery and will be responsible for any medical or other charges in connection with attendance at the camp. I acknowledge that at the B/D Camp my son will participate in a sport that may involve, among other things, physical contact of the body with other persons or objects, including the ground, that at the B/D Camp he may incur a risk of injury. I specifically WAIVE and give up and release the B/D Camp, its owners and staff from liability for any claim for damages which my son may have for injuries, or illness that he may sustain at the B/D Camp. I authorize the B/D Camp to use any photographs or articles about my son for publicity purposes. I also further agree to reimburse B/D Camp for any room damage caused by my son while attending the B/D Camp sessions.

He is covered by		Policy No
	Insurance Company	
Signature of parent or Legal Guardian		