

PEARCE MUSTANG JR. HIGH FOOTBALL CAMP

DATE: JULY 26 & 27, 2010
LOCATION: J. J. PEARCE FIELDHOUSE
TIME: 8:00 A.M. - 12:30 P.M.
FEE: \$50.00 ***\$45.00 FEE IF PAID BEFORE June 10, 2010

DIVISION I BOYS ENTERING 7TH GRADE
DIVISION II BOYS ENTERING 8TH GRADE
DIVISION III BOYS ENTERING 9TH GRADE

This camp will be very beneficial for a young person interested in football. It will be conducted by Pearce High, Parkhill Jr. High, and North Jr. High coaches. The coaches will provide each student with individual attention on basic skills. The camp will be conducted in a safe manner, with all activities closely supervised. An Athletic Trainer will be at the camp. All campers who register at least 2 weeks prior to camp receive a "Pearce Mustang Football Camp" t-shirt.

INSTRUCTION OBJECTIVES:

QUARTERBACKS: stance, center exchange, ball handling, faking, footwork, passing release, play execution, and reads
RUNNING BACKS: stance, ball handling, faking, handoff exchange, running, blocking, and pass receiving
OFFENSIVE LINE: stance, starts, blocking techniques, and pass protection
RECEIVERS: stance, receiving drills, blocking, pass routes, and play calling
DEFENSIVE LINE: stance, pursuit, blow delivery, alignment, reading offensive keys, pass rush, and gap responsibility
LINEBACKERS: stance, pursuit, alignment, run techniques, and pass responsibilities
SECONDARY: stance, alignment, pass coverage, interception drills, reads, and footwork
SPECIAL TEAMS: deep snappers, punting, kickers, kick returners, punt coverage, and field goal protection

WHAT DO I NEED FOR CAMP?

1. TOWEL: You must provide your own towel if you feel you need one.
2. ATTIRE: Shorts, t-shirt, socks.
3. SHOES: Cleated shoes would be best.
4. JEWELRY: Please leave all jewelry at home. We will not be responsible for valuables.
5. COMPLETED APPLICATION SHEET

NO REFUNDS AFTER THE WEEK OF THE CAMP

INFORMATION NUMBERS

ATHLETIC OFFICE (COACH ROBERTSON OR SARA SOWAN)	469-593-5100 OR 469-593-5146
PARKHILL JR. HIGH (BEN ALTMAN)	469-593-5600(SCHOOL #)
NORTH JR. HIGH (BILL BATES)	469-593-5331 (SCHOOL #)



MUSTANG FOOTBALL CAMP APPLICATION

MAKE CHECK PAYABLE TO MUSTANG FOOTBALL CAMP

NAME: _____ ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PARENTS OR LEGAL
GUARDIAN'S NAME: _____

PHONE: _____ ALTERNATE PHONE: _____

YOUR SCHOOL YOU ARE TO ATTEND IN 2010-2011: _____

GRADE FOR 2010-2011: _____ TEE SHIRT SIZE(Adult sizes) (Circle) XXXL XXL XL L M S

BIRTH DATE: _____ HEIGHT: _____ WEIGHT: _____

EMERGENCY CONTACT (IN CASE PARENTS CANNOT BE REACHED):

NAME: _____ PHONE: _____

MEDICAL INFORMATION:

I hereby certify that _____ is physically fit to participate in the MUSTANG FOOTBALL
CAMP, and I know of no physical impairments which would in any manner limit participation in such a program. Is there any pertinent
information which we might need, regarding your son, such diabetes, epilepsy, etc? _____

I hereby register my child for the camp described below and authorize the staff to direct him in participation in camp activities. I authorize the
staff to attend any health problem or injury my child may incur while attending camp. I further acknowledge that the MUSTANG FOOTBALL
CAMP, the coaches, Richardson I.S.D., and anyone associated with the MUSTANG FOOTBALL CAMP, will not be liable for any damage from
injuries or illness sustained during the MUSTANG FOOTBALL CAMP.

SIGNATURE OF PARENT OR GUARDIAN

Division I	Boys entering 7 th grade	\$50.00
Division II	Boys entering 8 th grade	\$50.00
Division III	Boys entering 9 th grade	\$50.00

PLEASE NOTE: \$46.00 FEE IF PAID BEFORE JUNE 10, 2010
NO REFUNDS AFTER WEEK OF CLINIC

CHECKS MAY BE DROPPED OFF AT ATHLETIC OFFICE OR MAILED TO
Mustang Jr. High Football Camp
1600 N. Colt
Richardson, TX 75080