



# Purple/Gold



29th Annual- Non Contact

# YOUTH FOOTBALL CAMP

# Purple/Gold



**ONE SESSION ONLY!!!**

**May 28th– 31st 2019**

**8:30am-11:00 am**

Grades 2nd-8th (entering Fall 2019)

Rain-out notification via email & Text by 8:00

*Check out our Web Page:*

[www.eurekawildcatsfootball.us](http://www.eurekawildcatsfootball.us)

**PAT GRIMSHAW**

**Purple/Gold Football Camp**

Geggie Elementary

430 Bald Hill Road

Eureka, Missouri 63025-1222

- Jacob Sumner** - Head Coach
- Pat Grimshaw** - Camp Director
- Pete Grace** - Assistant Varsity
- Tyler Wasson** - Assistant Varsity
- Luke Thuston** -Assistant Varsity
- Drew Hagen** - Assistant Varsity
- Tony LaRusso** -Assistant Varsity
- Jay Vermillion** -Assistant Varsity
- Trevor Grimshaw** -Freshman Assistant
- Mike Thebeau** -Freshman Head
- Ty Windom** -Freshman Assistant
- Mike Yancey** -8th Grade Head Coach

**Instruction will be provided in the following**

- General Football Instruction
- Basic rules & regulations of the game
- Proper static/ Dynamic stretching
- Form running and agilities
- Proper Football Stances and start
- Walk through form block and tackle– Safety
- Passing and receiving techniques
- Long snap, punting & kicking
- All positions offensive & defensive
- 7 on 7 Passing League (Last Hour of each Day)

**Including techniques for the following:**

- |                   |                           |
|-------------------|---------------------------|
| <b>OFFENSE</b>    | <b>DEFENSE</b>            |
| A. Lineman        | A. Defensive Lineman      |
| Centers           | B. Defensive Ends         |
| Guards            | C. Outside Linebackers    |
| Tackles           | D. Inside Linebackers     |
| B. Tight Ends     | E. Defensive Backs        |
| C. Wide Receivers |                           |
| D. Slot Backs     | * Heads up Safety will be |
| E. Quarterbacks   | talked during all drills  |
| F. Fullbacks      | and sessions.             |
| G. I-Backs        |                           |

**Each camper will be rotated through each offensive, defensive and specialty (kicking & punting) position in order to become familiar with each.**

This camp is not sponsored by the Rockwood school district

**Each participant will receive:**  
**A WILDCAT Football T-shirt**  
**Skill Testing Certificate**  
**Punt, Pass, & Kick Certificate**  
**7 on 7 Games**

Checks made payable to:  
**SJM Resources LLC**  
1 child \$ 80  
2 children \$140  
3 children \$185

**\*Little League Coach Welcome \***

**What to wear:**

**Clothes:** T-shirt, Gym Shorts

**Shoes:** Cleats (Bring Tennis Shoes in case of bad weather)

**\*NO METAL CLEATS ALLOWED**

**\*Applications should be returned as soon as possible**

**APPLICATION DEADLINE**

**MAY 27, 2019**

**\*\* Walk-ups Welcome Day #1**

**For more information contact Coach Pat Grimshaw**  
**Best Form of Communication (E-mail):**

**Grimshawpatrick@rsdmo.org**

**\*\*Camp Communication via E-mail \*\***

- **Weather adjustments**
- **Camp Details/ Information**
- **Drop off/ Pick-up Locations**

**Fill out the form below and Send Checks to: Geggie Elementary 430 Bald Hill Rd. Eureka, MO 63025-1222 Attn: Pat Grimshaw**  
**Make checks payable to: SJM Resources LLC**

Name \_\_\_\_\_ Grade Level (Next Fall) \_\_\_\_\_ School (Next Fall) \_\_\_\_\_

Address \_\_\_\_\_ Emergency Phone #: \_\_\_\_\_

Email Address \_\_\_\_\_

T-shirt size (Circle One) Adult: S M L XL or Youth: YS 6-8 YM-10-12 YL- 14-16

I/we being the parents and/or legal guardian of \_\_\_\_\_ Authorize SJM resources LLC and its employees and agents permission to request emergency medical treatment or care as necessary to insure the well-being of our/my child. Further, I claim that our/my child is found fit for all physical endeavors as well as being covered by valid medical insurance. I have also read the MSHSAA material on concussions, which includes information on the definition of a concussion, symptoms of a concussion, what to do if you have a concussion, and how to prevent a concussion. I hereby release SJM resources LLC and all its employees and agents from all claims on any account of any injuries which may be sustained by our/my child while participating in the camp and any future claims hereafter presented by our/ my child as a result of any such injuries.

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ <http://www.mshsaa.org/resources/pdf/2013%20PARENT%20CONCUSSION.PDF>

***Website FOR MSHSAA concussion materials***