FOOTBALL CLINIC
DAILY ITINERARY
• Coaches Talk
• Stretch & Form Running
• Agility by Circuit
• Break
• Offensive Stations
• Break
• Defensive Stations
• Team Period & Specialists Period
• Conditioning
• Cool Down Huddle Groups

FOOTBALL CLINIC
2012 Instructional Football Clinic
@ Williams College
22 Spring Street
Williamstown, MA 01267

2012 Instructional Football Clinic
@ Williams College
22 Spring Street
Williamstown, MA 01267

High School Boys Ages 13-18 and Youth Boys Ages 7-12
• July 30 - August 2, 2012 • 5:30 PM - 8:00 PM •
Camp Director - George McCormack, Assistant Football Coach, Williams College
**2012 Instructional Football**

**LOCATION:**
Both Clinics will take place on the artificial turf - Lamb Field - adjacent to Weston Field on Lathem Street on the campus of Williams College.

**CLINIC FEE:**
Early Registration-$100.00. Must receive application and a $25.00 non-refundable deposit BEFORE July 1, 2012.

Full payment is due prior to the start date of your respective clinic.

After July 1, 2012 - $125.00.
Full payment is due prior to the start date of your respective clinic.

**MEDICAL CARE:**
Medical facilities are nearby and a full-time trainer will be on the field.

**REGISTRATION:**
Registration will be the Monday of the clinic week, beginning at 4:45 p.m. All participants must check in by 5:15 p.m.

**CLINIC OBJECTIVE:**
Each clinic is designed for boys in their respective age groups who will be interested in fundamentals and techniques of playing football. The clinics will be staffed by Williams College, local high school and youth coaches, as well as area college players.

**CLINIC EMPHASIS:**
The emphasis will be on quality individual and group instruction allowing participants to engage in daily experiences with players of equal skills. Each player will receive extensive fundamental station drills, team concepts and individual instruction, developing speed, quickness, reaction and conditioning.

**TECHNIQUES:**
This non-contact clinic will provide step-by-step instruction on all aspects of football: running, throwing, punting, blocking, catching, offense, tackling, kicking and defense.

**REQUIRED EQUIPMENT:**
Helmets, mouthpieces, shoulder pads, practice shirt, shorts, athletic socks, spikes, sneakers, towel and a lock.

**All checks should be made payable to:**
George McCormack

Send registration and payment to:
Instructional Football Clinic @ Williams College
22 Spring Street
Williamstown, MA 01267

**LOCATION:**
Both Clinics will take place on the artificial turf - Lamb Field - adjacent to Weston Field on Lathem Street on the campus of Williams College.

**CLINIC FEE:**
Early Registration-$100.00. Must receive application and a $25.00 non-refundable deposit BEFORE July 1, 2012.

Full payment is due prior to the start date of your respective clinic.

After July 1, 2012 - $125.00.
Full payment is due prior to the start date of your respective clinic.

**MEDICAL CARE:**
Medical facilities are nearby and a full-time trainer will be on the field.

**REGISTRATION:**
Registration will be the Monday of the clinic week, beginning at 4:45 p.m. All participants must check in by 5:15 p.m.

**CLINIC OBJECTIVE:**
Each clinic is designed for boys in their respective age groups who will be interested in fundamentals and techniques of playing football. The clinics will be staffed by Williams College, local high school and youth coaches, as well as area college players.

**CLINIC EMPHASIS:**
The emphasis will be on quality individual and group instruction allowing participants to engage in daily experiences with players of equal skills. Each player will receive extensive fundamental station drills, team concepts and individual instruction, developing speed, quickness, reaction and conditioning.

**TECHNIQUES:**
This non-contact clinic will provide step-by-step instruction on all aspects of football: running, throwing, punting, blocking, catching, offense, tackling, kicking and defense.

**REQUIRED EQUIPMENT:**
Helmets, mouthpieces, shoulder pads, practice shirt, shorts, athletic socks, spikes, sneakers, towel and a lock.

**All checks should be made payable to:**
George McCormack

Send registration and payment to:
Instructional Football Clinic @ Williams College
22 Spring Street
Williamstown, MA 01267

**REGISTRATION FORM**

Return to:
Instructional Football Clinic @ Williams College
22 Spring Street
Williamstown, MA 01267

Name__________________________
Home Address____________________
City____________________________
State__________________________
Zip____________________________
Home Phone (   )_________________
School__________________________
Entering Grade (Fall 2012)__________
Height __________________________
Weight __________________________
Shirt Size________________________

IN CASE OF EMERGENCY NOTIFY:
Name__________________________
Address________________________
Phone (   )_____________________
Applicant’s Signature:________________________

2012 Instructional Football Clinic @ Williams College
The undersigned parent or guardian understands that while participating at the 2012 Instructional Football Clinic @ Williams College, my son will be engaging in physical activity which contains an inherent risk of physical injury, and the undersigned assumes the risk and releases, waives, and covenants not to sue the 2012 Instructional Football Clinic @ Williams College and the President and Trustees of Williams College, their Officers Trustees, Agents, Employees and related parties from any and all liability for personal injury, including, without limitation, any and all liability arising from the negligence of Williams, arising out of my son’s participation at the 2012 Instructional Football Clinic. I hereby grant permission for my son to attend the 2012 Instructional Football Clinic and to be treated by a licensed physician or a member of the athletic training staff for any injury, accident, illness, or mishap. I hereby agree to pay through my insurance company or otherwise for any medical treatment that may be necessary. I certify that my son is in good health and is able to participate in all activities.

Parent or Guardian Signature:________________________ Date:_________