

•TROJAN FOOTBALL CAMP 2008

Contact: Coach John DeSimone 215-804-5164 ~ desimoid@npenn.org

We provide lunch (juice, pizza, & a snack), T-shirt, & awards.

Wissahickon Football



“Commitment to Excellence”

2007 Suburban One
American Champions

Camp Staff: The camp staff is a group of enthusiastic coaches with a wealth of collegiate football experience who have dedicated themselves to the WHS football program.

John DeSimone – WHS Head Football Coach - QB’s and RB’s
Larry Cannon – RB’s and LB’s
Mark Fischer- WR’s and DB’s –
Ricky Leisey Jr. – Oline and Dline –
Pete Rooney – Certified Athletic Trainer

The camp staff also includes current and former members of the Wissahickon High School football squad.

Ages 8 – 14

All Students

Date:

July 21 – July 25

~ On the Wissahickon High School Turf Field ~

Time: 9:00 – 3:00

8:30 Drop-off (Day 1) in the Dome Gym

As the summer is quickly approaching, the Trojan Football Camp staff is excitedly anticipating another fun-filled camp experience.

Our goal is to provide an enjoyable competitive environment for youths throughout our community and surrounding areas.

The purpose of this non-contact camp is to provide expert instruction in a fun, yet competitive environment. Film sessions, demonstrations, drills and competitions will be held daily under the guidance of the Wissahickon Football Camp Staff. Specialized instruction is offered for all offensive and defensive positions.

Daily Team Competition – Ultimate Football

Make checks payable to:
Wissahickon Activities Fund

Mail to:
478 Cheswyck Dr.
Harleysville, PA 19438

Cost: \$125.00 per camper

- (\$115.00 if paid before 6/11/08)
- Registration Deadline July 15th, 2008
- * **No Refunds**
- Discount deadline: June 11th, 2008
- Late registration Fee: \$15 per camper
- Cost includes lunch

Discounts –

- Two children from the same household = Deduct \$5 off the price for each child.

Camper Should Bring – Football cleats, sneakers (suitable for gym floor in event of rain) Picnic jug – We will have plenty of water available during practice but campers are encouraged to bring a picnic jug out to the field.

Please cut & mail in this section.

Name _____ Age _____

Parent/Guardian _____

Address _____

Phone: (H) _____

(W) _____

E-mail _____

Grade in Sept. 2008 _____ Gender (M – F)

Offensive Position (circle one): QB RB WR Line

Defensive Position (circle one): LB DB Line

T-Shirt size (Men’s) S – M – L – XL

Parent Guardian Authorization:

I hereby approve of my child’s attendance to the Trojan Football Camp and certify that he/she is in good health and able to participate in the camp program. I authorize that the director/trainer act for me according to his best judgment in any emergency requiring medical attention. I understand, should an emergency condition arise, I will be contacted during the physical exam. If I am not available, I authorize you to contact:

Physician: _____

Phone: _____

I recognize that insurance coverage on injuries received during the camp is the responsibility of the parent or guardian’s insurance policy.

Signature _____