

**COACH RALPH MUNGER &  
THE ROCKFORD FOOTBALL STAFF**

**ROCKFORD FUNDAMENTAL YOUTH CLINIC 2006**

Parents are welcome to bring along their cameras, video cameras and lawn chairs daily.

INVITE ALL UPCOMING 4TH AND 5TH GRADERS AND UPCOMING 6TH AND 7TH GRADERS TO FOUR DAYS OF NON CONTACT FUNDAMENTAL DRILL WORK ASSOCIATED WITH PLAYING FOOTBALL IN A SAFE AND SUCCESSFUL MANNER.

WE WILL BE TEACHING AND COACHING TWO SEPARATE CURRICULUMS WITH THE UPCOMING 6TH AND 7TH GRADES BEING TAUGHT MORE ADVANCED TECHNIQUES USED WITHIN THE ROCKFORD FOOTBALL SYSTEM.

**DATE:** JULY 31<sup>st</sup> - AUGUST 3<sup>rd</sup>  
**TIME:** 9:00 AM sharp until 12:30 PM  
**PLACE:** Rockford High School Practice Fields  
**COST:** \$60.00 (PRIOR TO JULY 7th)

**Registration after JULY 7th is \$65.00 with NO guarantee of camp issued items**  
**MAKE CHECKS PAYABLE TO: ROCKFORD FOOTBALL ACCOUNT**

**CURRICULUM=SKILL DEVELOPMENT  
AND INSTRUCTION IN PROPER AND  
SAFE TECHNIQUES USED IN:**

- STANCE AND STARTS
- PULLING TECHNIQUES
- BLOCKING AND TACKLING
- PASSING MECHANICS
- RECEIVING TIPS
- HAND OFF MECHANICS
- FOOTWORK DRILLS
- LONG SNAPPING
- PLACE KICKING
- PUNTING



**DRILL WORK EMPHASIZING:**

- BALL SECURITY
- BALL RECOVERY
- SCOOP AND SCORE
- BLOCKING PUNTS
- INTERCEPTING TECHNIQUE
- BALL REACTION
- PROPER PASS ROUTES

**PARTICIPANTS WILL ENJOY 7 ON 7  
ACTIVITIES ALONG WITH VARIOUS SKILL  
CONTESTS AND A FINAL DAY RAFFLE**

**MAIL THE BACKSIDE OF THIS BROCHURE TO:**

**COACH RALPH MUNGER • ROCKFORD HIGH SCHOOL • 4100 KROES • ROCKFORD, MI 49341**

**??QUESTIONS??**

**CALL COACH MUNGER**

**AT (S) 863-6030 OR (H) 866-7797**

**EMAIL ADDRESS: [rmunger44@aol.com](mailto:rmunger44@aol.com) or  
[rmunger@rockford.k12.mi.us](mailto:rmunger@rockford.k12.mi.us)**

Parents: don't miss "GAME DAY Thursday." It is a day that is action packed and full of excitement!

# FUNDamental Youth Clinic

## Registration Form

\_\_\_\_\_  
Future Ram Gridder

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Birth

\_\_\_\_\_  
**GRADE ENTERING**

\_\_\_\_\_  
Elementary or Middle School Attending in Fall '06

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Primary Phone #

\_\_\_\_\_  
Secondary Phone #

**T-Shirt Size (Circle Please )** YOUTH: LG XL or MENS: SM MED LG XL

I understand that the applicant will be engaging in physical activity during this camp, which contains an inherent risk of physical injury. The undersigned assumes full responsibility for any and all injuries which the applicant may incur while participating in the Rockford Football Football Clinic.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Name Printed

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date