

Flexbone Association 2010 Football Camps



Ripon College - Ripon, WI June 30 - July 3 2010 - www.flexboneassociation.com

Please direct any questions to flexboneassociation@gmail.com or call 920-539-6560 or 570-332-0265

Sponsored by JC Athletics - www.jcasports.com

Check In 12p-2p on June 30th. Check out by 12p on July 3rd.

Dear Parent and Camper,

The Flexbone Association is proud to present to you its 2010 Football Camp, a working camp for the student-athlete who is serious about becoming the best at his position. Our purpose is to give the junior high school and high school athlete mastery of the fundamentals in a concentrated area.

The 2010 Flexbone Association Football Camp will focus solely on the fundamentals of the Quarterback, Fullback, Slot Back, Receivers, and Offensive Line positions within the Flexbone/Triple Option Offense. Campers will be divided into age and size groups to enable them to improve and learn at their own pace.

ALL DRILLS THAT ARE USED IN THE CAMP ARE THE SAME DRILLS THAT GEORGIA TECH, THE UNITED STATES NAVAL ACADEMY (NAVY), THE UNITED STATES MILITARY ACADEMY (ARMY), GEORGIA SOUTHERN USE TO TRAIN THEIR PLAYERS.

We have a well-qualified staff of instructors who are sincere in their desire to teach and help develop young people. If you want to become the best you can be at your position, we would enjoy working with you at the 2010 Flexbone Association Football Camp.

Scott Jazdzewski and Lou Cella
Camp Directors/Co-Founders of Flexbone Association (est. 2007)



Prospective Campers

Participants in high school grades 7-12. Any player participating in an option offense will be able to benefit from the camp.(Flexbone, Split Back Veer, I-Option, or even Wing-T teams who also use option)

Housing and Food

All campers will be housed two to a room. Resident campers will be served eight well balanced meals during the course of the camp. Commuting campers will be offered all meals as well.

Insurance

Each camper will be covered by a group accident insurance policy. The cost of insurance is included in the registration fee. The insurance includes primary coverage up to \$1,000, secondary coverage up to \$5,000, and \$300 maximum dental insurance. (Insurance does not cover pre-existing injuries and is for accidents only.) Every precaution will be taken to prevent accidents. The Flexbone Association Camps will have a camp health supervisor available.

Registration

Final registration/check-in will be held from Noon-2 PM on the first day of the camp. Dinner will be the first meal provided on the camp's first day. Residence hall assignment will be given at this time. Check out will be at noon on the final day.

Camp Fees

The camp fee for residents is \$250, \$210 for commuters. This includes a \$100 non-refundable deposit. The fee includes meals, lodging, insurance, etc. *NO PERSONAL CHECKS*...Cashier's check or Money Orders only. Make checks payable to Flexbone Association LLC, P.O. Box 108 Waupun, WI 53963

Camp Staff

We will work tirelessly to bring together the best flexbone football coaches we can to each location. The brochure will be updated as coaching commitments are finalized.

What to Bring

Cleats, Running Shoes, Multiple Pairs of Clean Socks (8), Multiple Clean T-Shirts (8), Your Own Linens, A Fan, Multiple Pairs of Athletic Shorts, Sunscreen, Water Bottles/Jugs, Do not bring excessive amounts of cash.

Why You Should Attend the Flexbone Association Football Camp

1. You will receive intensive training over a four-day period in all aspects of the FLEXBONE offense, which will include over 16 hours of instruction.
2. The drills used at the camp are the EXACT drills used this spring at FLEXBONE colleges nationwide including Georgia Tech, Navy, Army and Georgia Southern.
3. We will combine test you in the 40 Yard Dash, Vertical Leap, Broad Jump and Pro Agility Drill.
4. All results from the combine will be submitted to FLEXBONE colleges other camp hosts nationwide, as well as a national flexbone database. These school include, but are not limited to, (The United States Military Academy, The United States Naval Academy, The United States Air Force Academy, Georgia Southern University, The Citadel, Harding University, Springfield College, Lincoln University, Salisbury University, Lenoir Rhyne College, Northwood University, Ripon College, Maine Maritime Academy, Martin Luther College) and many more.
5. This is a FUNDAMENTALS camp. The entire coaching staff is committed to making you better as a player. We are not simply interested in evaluating talent.—WE WANT YOU TO BE SUCCESSFUL IN YOUR UPCOMING SEASON!
6. When you leave the camp, you will have a firm grasp of the Triple Option and its various tags, Midline Option and its various tags, Rocket Toss, Counters off the Triple Option, Play Action Passing, and Pass Protection.
7. Each night session will include leadership training. We will teach you how to think like a champion as well as play like one.

CORE VALUES OF WORKOUTS

1. MASTER BALL SECURITY AND BLOCKING V. PENETRATION/PURSUIT.
2. MASTER OFFENSE V. MULTIPLE LOOKS, MESH CRASHING #1, AND FAST PLAYING #2
3. MASTER ALL BASE AND SELECT COMPLIMENTARY PLAYS OF THE FLEXBONE OFFENSE

GROUP DRILLS

QB/RB/SB

- LIVE TRIPLE OPTION (W/ TAGS) V. #1, #2, AND #3
- LIVE MIDLINE (W/ TAGS) V. 3 TECH, #1, AND #2
- LIVE ZONE DIVE V. NOSE AND FORCE PLAYER
- LIVE ROCKET TOSS V. ALLEY PLAYER AND TRAIL PLAYER
- LIVE COUNTER OPTION V. #2 AND #3
- LIVE TRIPLE PASS V. #1, #2, AND #3
- LIVE INDY PASS/7-ON-7

Wide Receivers

- LIVE STALK
- LIVE CRACK
- LIVE RUN OFF
- LIVE CUT OFF
- LIVE ROUTES
- LIVE TRIPLE PASS V. #1, #2, AND #3
- LIVE INDY PASS/7-ON-7

Centers and Guards

- LIVE SCOOP
- LIVE ACE
- LIVE BASE
- LIVE RUN TO SIDELINE/LOG/VEER
- LIVE TRIPLE PASS PRO
- LIVE PASS PRO

Tackles

- LIVE SCOOP
- LIVE VEER
- LIVE BASE/HPC/RUN TO SIDELINE
- LIVE TRIPLE PASS PRO
- LIVE PASS PRO

Daily Schedule

1. QUIET TIME
2. BREAKFAST
3. MORNING WORKOUT
4. LUNCH
5. REST PERIOD
6. AFTERNOON WORKOUT
7. DINNER
8. EVENING WORKOUT
9. PROGRAMS
10. LIGHTS OUT

CAMP RULES / WAIVER

- Campers with cars must turn in the car keys. Cars will not be used during the camp.
- Lights out will be at 11:00 p.m.
- Do not leave campus. Be present at all meetings, meals and practices.
- Campers will not be permitted to leave early unless parental permission has been cleared with the Camp Director.
- Possession of any tobacco, drugs, or alcohol, or any weapons including guns and or knives are strictly prohibited
- Those not abiding by these rules will be sent home at the players expense **without refund.**
- Any actions that could be considered hazing are also strictly prohibited and will result in immediate expulsion from the camp. We are all here to become better football players.
- By completing the registration form, I acknowledge and understand the rules of the camp.
- I understand I may be held liable for any damages incurred by my child at this camp.
- I have read the rules and regulations listed above and will abide by them. Violation of rules will mandate immediate expulsion with no refund.
- Any lost or missing keys will be the responsibility of the camper

REGISTRATION FORM

Flexbone Association Football Camp Grades 7-12 - Ripon College, Ripon, WI Directions -

<http://www.ripon.edu/about/location.html>

Circle One: Resident Commuter

Name _____

Last First M.I.

Address _____

City _____ State _____ Zip _____

Parent or guardian _____

Telephone: Home (_____) _____ Cell (_____) _____

Height _____ Weight _____ Age _____ Sex _____

E-mail address: _____

Football Position for Camp

QB FB Slotback WR Center Guard Tackle

Grade entering in fall 2010 _____

School attending in fall 2010 _____

Roommate preference _____

(list one only)

Complete One:

Enclosed is \$ _____ as full payment.

Balance is due 31 Days Before Camp Start Date - Space is limited, dont delay. Walk up registrations will NOT be accepted.

Insurance company _____

Insurance company address _____

Policy holder _____

Policy number _____

I verify that my child has been checked by a licensed physician and is physically able to participate in the Football Camp. I agree to allow my child to be treated by a licensed physician while attending, if necessary, and to assume all costs related to such treatment. I authorize the disclosure of medical information to my insurance company for the purpose of claim. I understand that if this application is accepted, there is no refund of the deposit if we (parent of child) should cancel the application later.

Parent's/guardian's signature _____