



**2013 Moline Maroons  
High School Football Camp  
Incoming 9th - 12th Grades**

**Dates:** July 8th - 12th, 8:00 - 10:00  
July 15th - 19th, 9:00 - 12:00  
July 22nd - 26th, 9:00 - 12:00

**Location:** Coolidge Campus Football Field

**Athletic Department:** 309-743-8830

**Coach Matt Woods:** 309-743-8825

**E-mail:** mmwoods@molineschools.org

**Camp Objective:** Introduce and teach the fundamentals to be a football player in the Moline system. The programs' foundation is built on fundamentals, team, discipline, and a positive attitude. Players will participate in drills which will improve agility, strength, conditioning, and knowledge of offense, defense, and special teams. The Moline High School football staff and players will be there to help teach and encourage participants. "You miss 100% of the chances you don't take."

**What To Bring:** Gym clothes, football and gym shoes, and water/sports drink.

**Camp Staff:**

Head Football Coach: Matt Woods

High School Football Staff

Former Players and Coaches



"20 years from now you will be disappointed by the things you didn't do than by the one's you did. So throw off the bowlines. Sail away from the safe harbor. Catch the trade winds in your sails.

Explore. Dream. Discover." -Mark Twain

**Will + Work = Win**

"Your talent determines what you can do. Your motivation determines how much you are willing to do. Your attitude determines how well you do it."

**IHSA Rule:** Athletes must pass 5 classes in order to be eligible to play.

**Mail to:**

Moline High School  
Attn: Matt Woods  
3600 Avenue of the Cities  
Moline, IL 61265

**Name:** \_\_\_\_\_

**Grade for the 2013-14 year:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Parent Name:** \_\_\_\_\_

**Emergency phone number:** \_\_\_\_\_

**Shirt Size Please Circle only 1:**

Youth: S, M, L Adult: S, M, L, XL, XXL

**Cost: \$55.00 Make checks payable to:**

**Maroon Football Camp**

\*Please contact Coach Woods if your family is having financial difficulty\*

**Disclosure**

I certify that my son/daughter is in good health and able to participate in all camp activities. I agree not to hold District #40 and its coaching staff liable for any accidents that may occur. I also agree to allow my son/daughter to be treated by a licensed physician, if necessary.

***\*Parent/Guardian signature:***

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