

**2013 LITTLE POINTERS Football  
Clinic**

**June 24<sup>th</sup> – 28<sup>th</sup>**

**6 – 11 Years old**

**Point Loma H.S.**

**Clinic Hours: 11:30 pm – 2:00 pm**

Coach Hastings is offering a 5 day youth football clinics this summer.

The clinic will be for students who are 6-11 years old (around the grades 1 – 6), the kids will be divided into two age groups, ages 6-8 and 9-11. The clinic will feature daily football instruction with Coach Hastings and his staff.

6 – 8 year old’s will be introduced to the skills for football. The football clinic, held at Point Loma High School, will include the following:

- Individual fundamental position skills
- Flag football tournaments
- Various competitive contests with prizes
- EMAP Football Camp T-Shirt
- Emphasis on FUN!

9 – 11 year old’s will be focusing on improving the necessary skills to excel at football.

The football clinic, will include the following:

- Individual fundamental position skills
- Plyometrics and Foot Speed Drills
- EMAP Football Clinic T-Shirt
- Various competitive contests with prizes
- Exceptional preparation for fall football seasons (flag or contact)

**Football Clinic  
Information**

**\*\*FOR BOYS & GIRLS\*\***

**Early Registration**

**\$125**

**Postmarked by June 17th**

*All walk up registrations are  
\$150 per child*

**\*\*Sibling discount, second child  
is only \$75 – early registration,  
\$100 if walk up\*\*\***

**ABSOLUTELY NO REFUNDS!**

All checks should be made  
payable to: *Point Loma Football*

Return check and form to  
Attn: Coach Hastings  
Point Loma H.S.  
2335 Chatsworth Blvd.  
San Diego, CA 92106

***Point Loma H.S. Football***

***Recent League Champions: 1982,  
83, 84, 87, 88, 90, 91, 92, 93,  
2004, 05, 06, 07, 09, 10, 11***

***CIF Champions: 1949, 1966, 1982,  
1988, 1991***

***CIF Finalist: 1960, 2005, 2006,  
2007, 2009***

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

**Age** \_\_\_\_\_

**Shirt Size** \_\_\_\_\_

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

**School** \_\_\_\_\_

**Parent or Guardian**

**Business Phone**

**Home Phone**

**Name of person to be  
notified in case of  
emergency** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Doctor** \_\_\_\_\_

**I approve of the participants  
attendance at the Point Loma High  
School LITTLE POINTERS football  
Clinic and certify that he/she is in  
good health and able to participate in  
the camp activities. In case of  
accident, injury, or illness, Point Loma  
H.S. coaches, staff, and /or other  
medical personnel have my permission  
to use their best judgement in the care  
of my child.**

**Parent/Guardian**

**Date**

**Insurance Company** \_\_\_\_\_ **policy number** \_\_\_\_\_