

# Parkland Staff Philosophy

Our mission is to provide quality, age appropriate, individual instruction by the Parkland Football staff and current Varsity Athletes.

Coach Moncman and his staff believe that the foundation to any player's skill set is proper fundamentals, technique, and love for the game.

## CAMP HIGHLIGHTS

- Introduction to technique each position requires.
- Demonstration of safe football techniques
- Discussion with current and former Parkland players from the District Championship team.
- Parkland High School football practice facility
- SATURDAY COMBINE

## Cost:

\$100 Camp Registration

**Make Checks Payable to:**

Mr. Tim Moncman  
5001 Lanark Road  
Center Valley, PA 18034

## TROJAN FOOTBALL CAMP

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Youth Football Camp  
Grades 3<sup>rd</sup>-9<sup>th</sup>  
@ Parkland High School

June 19<sup>th</sup>-23<sup>rd</sup>, 2018  
9:00 A.M-12:00 P.M.

**\*SATURDAY  
10:00 AM-12:00 PM**



## Coaching Staff

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Head Coach Tim Moncman

- Defensive Coordinator 2012-Present
- 2008 PIAA 4A State Champions (Liberty H.S.)

Asst. Coach Bret Comp

- Offensive Coordinator
- Quarterbacks Coach
- 2006 PIAA 2A State Champions (Wilson Area)

Asst. Coach Bob Ruisch

- Special Teams Coordinator
  - Tight Ends Coach
  - Youth League Coach (SPYA)
- Parkland Football Players will also contribute to camp instruction.



## What to bring

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- Proper workout clothes
- Cleats
- \*Sneakers IN EVENT OF RAIN
- Water Bottle
- Sun Screen

**ALL CAMPERS WILL RECEIVE A FREE T-SHIRT FOR ATTENDING CAMP.**

### Tentative Daily Schedule

8:45-9:00 Drop-Off @ Softball Lot  
9:00-9:10 Camp Wide Warm-Up  
9:10-9:15 Water Break  
9:15-9:45 Position Instruction Period  
9:45-9:50 Water Break  
9:50-10:20 Position Instruction Period  
10:20-10:25 Water Break  
10:25-10:55 Position Instruction Period  
10:55-11:05 Water Break  
11:05-11:30 Speed & Agility Training  
11:30-12:00 Camp-wide Games

## Parental Consent

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I hereby grant permission for my child to attend the Trojan Football Camp and verify that my child has received a physical examination in the past year and is physically capable to participate in the activities related to the camp. In case of any emergency requiring medical attention, I hereby authorize the staff of the Trojan Football Camp to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release the camp and/or its agents or employees from all liability or illness to my child as well as any injury or damage caused by my child while my child is at the camp. I verify that my child is covered under a current medical insurance plan. I also understand that for liability reason this camp is not a Parkland School District sponsored activity

### Signature

\_\_\_\_\_  
**Must be signed by parent or guardian**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Age \_\_\_\_

Emergency phone # \_\_\_\_\_

T-SHIRT SIZE: \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

Please print clearly