

HIGH SCHOOL SKILLS CAMP

TUESDAY JUNE 9TH



CAMP SCHEDULE

2:00-3:00 Registration Robert W Plaster Center

3:00 Welcome/Introductions

3:15 Dynamic Warm-Up

3:30-6:00 Practice Robert W Plaster Center

6:00-7:30 Dinner on your own —Pick-up @ Robert W Plaster Center

7:30-7:45 Dynamic Warm-Up Carnie Smith Stadium

7:45-9:30 Practice Under the Lights @ Carnie Smith Stadium

PITTSBURGH STATE FOOTBALL

- * ALL-BRIANE WINNINGEST NCAA Div. II Football Program in the Country
- * 4 Div. II National Championships
- * 12 MIAA Conference Championships

PLASTER INDOOR FACILITY



BRANDENBURG FIELD /



2020 Brian Wright High School Skills Camp



Tuesday, June 9, 2020

HIGH SCHOOL SKILLS CAMP

WHAT EQUIPMENT TO BRING

- Athletic Shorts & Cleated Shoes
- Additional Equipment (Optional)
- Girdles, Knee Braces, Gloves, etc...
- Sack Lunch (lunch will not be provided)

Camp Philosophy

This Camp is a football instructional camp designed to teach technique and the detailed points football skill positions. The one day non-padded camp will provide fundamental and footwork skills for all positions excluding linemen as well as group work. Combine style drill work will also be included as well.

CAMP FEES

\$75.00

**Includes: Camp T-Shirt
Camp Insurance**

Checks payable to *Brian Wright Camps*

REGISTRATION/CHECK-IN

Registration/Check-in will be located in Plaster Indoor Center on the afternoon of the camp.

Make checks payable to "Brian Wright Camps" and send to:

Brian Wright Skills Camp
c/o Matt Karleskint • PSU Football Office
Pittsburg, Kansas 66762
Office: (620) 235-4846 Email:
mjkarleskint@pittstate.edu

Brian Wright Skills Camp Application Authorization for Participation & Liability Release

I hereby grant permission for my child,

to participate in the Brian Wright Skills Camp. My child has not suffered any illnesses in the past that would make participation in the camp a risk. I further agree to release from any liability, the Brian Wright Skills Camp, its staff, Pittsburg State University and the Kansas Board of Regents for any injury or illness suffered by my child while attending or traveling to or from this camp. I further authorize the staff of the Brian Wright Skills Camp to act for me in case of any medical emergency because of injury or illness to my child. I acknowledge that I am aware that participation in this camp will require physical activities of a nature which could result in injury to participants not withstanding the absence of fault on the part of the camp, its staff, Pittsburg State University and the Kansas Board of Regents. I am hereby authorizing my child to participate in these activities. I realize that by allowing my child to participate in the Brian Wright Skills Camp he is assuming a certain amount of risk and that he could suffer a severe injury. A certified trainer will be on staff at all times. I am hereby authorizing my child to participate in these activities.

Signature of Parent / Guardian _____ Date _____

Insurance Company _____ Insurance Policy Number _____

Camper's Name _____

Address _____

City _____ State _____ ZIP _____

High School _____

Parent's Home Phone () _____

Parent's Work Phone () _____

Grade Entering _____ Age _____ Ht _____ Wt _____

Position (Circle One) QB WR RB

Online Registration available @pittstategorillas.com

