

FALCON FOOTBALL Camp Staff

The Keith Cromwell Falcon Football Camp is
staffed by the Menendez Football Coaches.

This diverse staff boasts over 60 years of
high school and college
coaching experience.



There is an excellent MHS Coaches
coach to player ratio. Each participant
will receive individual attention and in-
struction.



Menendez Football Commitment & Sacrifice

Pedro Menendez High School
600 State Rd 206 W
St. Augustine, FL 32086

Phone: (904)547-8689

Email: cromwek@stjohns.k12.fl.us

THE KEITH CROMWELL FALCON FOOTBALL CAMP

YOUTH CAMP
MENENDEZ
HIGH SCHOOL



When:

July 12 - July 14, 2010
8:30 - 11:00 am.

Where:

MHS Athletic Complex

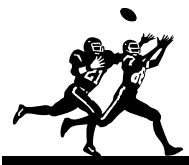
Who:

All students who will be entering
the 1st through 8th grades

Tel: (904) 547-8689

Daily Schedule

- 8:30 Check In
- 8:45 Warm up/Dynamic Stretch
- 9:00 Offensive Individual Drills
Offensive Line
Running Backs
Quarter Backs
Wide Receivers
- 9:40 Break
- 9:45 Defensive Individual Drills
Defensive Line
Linebackers
Defensive Backs
- 10:30 Team Offense/Team Defense
- 11:00 Camp ends



Competitive Drills teach the application of skills

What to Expect

Warm up - Active/Dynamic Stretch

Emphasis placed on form run and range of motion

Monday:

Basic Skills and Drills

Building block skills stressing football position and leverage

Tuesday:

Intermediate Skills and Drills

Complex movements and combination drills that build on basic skills

Wednesday:

Advanced Skills and Drills

Advanced techniques and skills
Drills requiring multiple skills and coordinated movements

Everyday:

Competition

Game simulation drills. One on one, pass skeleton, etc.

What to Bring

Campers should wear weather appropriate workout clothes (T-shirt, shorts, etc). Athletic Shoes are mandatory, cleats are recommended, but not required for outside drills.

Registration Form

Name: _____

Parent/Guardian Name(s): _____

Address: _____

Phone: (____) _____ - _____

Current Grade: _____ Age: _____

Offensive Position: _____ Defensive Position: _____

Special Teams Position: _____

CAMP COST: \$50

**Includes: Camp T-Shirt
Certificates**

**Please make checks payable to The Keith
Cromwell Falcon Football Camp**

Check # _____ Cash _____

and return with payment

Disclaimer:

I as a parent/guardian, hereby give permission for my child to participate in The Keith Cromwell Falcon Football Camp. I acknowledge the fact that he is physically able to participate in camp activities. I authorize the directors of the camp to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost (through family medical insurance or otherwise) due to sickness or injury to my son. I hereby waive any claim I might have against The Keith Cromwell Falcon Football Camp and the institution providing the facilities.

_____/_____/_____
Parent/Guardian Signature Date