

## Daily Program

8:45— Arrive

9:00—Clinic Begins

9:05—Warm-Up Exercises

9:20—Instruction begins

10:30—Guest Speaker

10:45—More Skills and Instruction

11:00—Games

12:00-Clinic Ends



## Instructional Emphasis

- Receiving Drills
- Passing Drills
- Blocking Technique
- Tackling Technique
- Defensive Skills
- Punting & Kicking Game
- Football Rules
- Sportsmanship
- Learn the Game & Have Fun!!!

Registration for this clinic begins  
Monday April 6th

Mail Application to:  
Lynch Park Office  
55 Ober Street  
Beverly MA 01915

For More information:  
Dan Bauer  
E-Mail [dgbauer@comcast.net](mailto:dgbauer@comcast.net)  
Cell (781) 820-1074

# Beverly Panthers Football

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## Youth Skills Clinic

*Building future skills now*

Monday July 6th—Friday July 10th

9:00am—12:00pm

Location: Beverly High School

Cost: \$90

Who can attend:

Any 2nd through 7th graders.

Prior football experience is not required.

## Clinic Staff

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Dan Bauer—Head Football Coach Beverly High School

Dave Wilbur—Head Freshman Coach Beverly High School

Jeff Hutton—Assistant Football Coach BHS

Jeff Munroe—Pop Warner A-Team Coach

**\*\*\*Plus—Daily Guest Speakers\*\*\***

**Our Clinic Goals:**



*Team sports such as football can greatly enhance a young man's self esteem and build confidence*

Our staff is committed to create an environment that is fun, safe and a learning experience for all. This is a **non-contact** football clinic with the emphasis on proper technique, skill development and knowledge of the rules as it pertains to the game of football. Every athlete will be exposed to all areas of football. Our goal is by the end of the clinic their understanding of the game will be greatly enhanced.

**Who Can Attend?**

Beverly Football Skills Clinic is open to anyone entering 2nd through 7th grade in the fall of 2009. This clinic is available to anyone from any community.

**Youth Registration 2007**

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Father's Name \_\_\_\_\_

Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_

Cell Phone \_\_\_\_\_

Emergency Name \_\_\_\_\_

Medical Ins Co Name \_\_\_\_\_

( ) M      ( ) F      Age:

Date of Birth \_\_\_\_\_

Entering Grade (Sept '07) \_\_\_\_\_

Business Phone \_\_\_\_\_

Pager \_\_\_\_\_

E-Mail Address \_\_\_\_\_

T-Shirt size \_\_\_\_\_

**Full Payment Must Be Sent with Application**

WAIVER OF DAMAGES AND RELEASE OF CLAIM OF MINOR CHILD: The undersigned, being the parent or legal guardian of

\_\_\_\_\_, a minor child, in consideration of his/her use of property belonging to the City of Beverly, and/or his/her participation in programs, leagues or events sponsored by the City of Beverly, and being aware of the risks associated with such use or participation, hereby release and discharge the City of Beverly, its agents and employees from any and all claims for personal injury or other damages that I might have as such parent or legal guardian, now or in the future, and from any and all claims that my said child may have now, or may acquire in the future, as a result of personal injury or damages that he/she may sustain as a result of his/her participation in

\_\_\_\_\_  
(name of Program, League or Event)

I agree that pictures taken in connection with the program or event may be used for future promotional purposes. Registration by telephone signifies acceptance of the above listed Waiver of Damages. Signed in the presence of

\_\_\_\_\_

Please make checks payable to:  
**Beverly Recreation Department**

Credit Card Payment: ( ) Visa ( ) MC

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Today's Date \_\_\_\_\_