

FALCON CAMP

CAMP INTENDED FOR ATHLETES ENTERING GRADES 6-12



Hanford Falcon coaches believe in developing our athletes one rep at a time. Our roster development begins in our off-season at Falcon Camp, so our athletes are physically and mentally ready to compete at the highest level by the time their athletic season begins. Our camp will emphasize speed, agility, strength, and power development. In addition to our athletes' physical development, we will shift gears and focus on sport specific skill development. Athletes will test at the beginning and end of camp to show gains. Attendance will be emailed weekly to all head coaches at Hanford High School.

**OUTWORK EVERYBODY
OUTWORK EVERYBODY TOGETHER**



**"THE FALCON WAY"
EXCEEDING ALL EXPECTATIONS**

CAMP DETAILS

Location: Hanford HS
Weight Room
Dates: June 20-August 12
Time: HS Males 7-9
HS Female 8:30-10:30
MS Female 10-11
MS Male 10:30-11:30
Camp Fee: \$75 (includes
camp t-shirt)
Payment: Checks to
Richland School
District
Player Gear: Athletic shorts,
athletic shirt,
athletic shoes

REGISTRATION INFORMATION

Registration and payment can be delivered or sent by mail to Hanford High School:

Falcon Camp
Hanford High School
450 Hanford Street
Richland, WA 99354

Payment must be in the form of a personal check, money order, or cashier's check made out to Richland School District – cash will not be accepted.

CAMP HIGHLIGHTS

- *Campers coached by Hanford High School Coaching Staff
- *Camp T-Shirt
- *NEW DRILLS AND TECHNIQUES
- *Participants grouped by age and gender for maximum results
- *Competitions to apply newly developed skills
- *Strength Training
- *Agility Training
- *Plyometric Training
- *Sport Specific Training
- *Nutritional guidance for maximum results
- *CAMP MVP'S WILL BE ANNOUNCED

CAMP REGISTRATION FORM

Participant Name: _____ Grade: _____
Parent(s) Name: _____
Address: _____ City: _____ Zip: _____
Home Phone: _____ Work Phone: _____ Cell Phone: _____
Email: _____
Physician: _____
Physician Phone: _____
Emergency Contact: _____
Emergency Phone: _____
Camp T-Shirt Size: YM YL YXL S M L

INSURANCE INFORMATION

Participants are required to have health insurance coverage for injury and/or accident to enroll in our 1st annual Falcon Camp. I verify that _____ has medical insurance with: _____ (Participant) _____ (Insurance Company)

which effectively covers any medical cost incurred as a result of participation in the 2016 Falcon Camp. Furthermore, I authorize the Hanford High School staff to seek any necessary emergency medical treatment my child may need during the course of the Camp. As the parent/legal guardian of _____ (Participant) I acknowledge the potential risk of injury related to physical activity associated with participants in our Falcon Camp and assume all risks and hazards are incidental to the conduct of the camp activities.