

Outline:

Camp location:

Oakridge High School
5493 Hall Road, Muskegon, MI 49442

Pre-Registration cost: \$60
Walk-up registration: \$70
(make checks payable to
SchugarsCoach4Life)

CAMP STAFF:

- Jack Schugars – Ferris State University
Football Special Teams Coordinator
- Eric Schugars – Assistant Varsity
Football Coach, Traverse City Central
- Steve Ledbetter – Kicking Coach
- Cary Harger – Head Football Coach
Oakridge High School, Camp Site
Coordinator
- College Players
- Tom Creguer – Punting Coach

WHAT TO BRING: - 2 or More marked
footballs, Kicking Tee/Block, Ball Holder,
Sunscreen, Enthusiasm, Signed release
form / registration and Willingness to
Learn.

ELIGIBLE PARTICIPANTS: All students
entering the 7th through the 12th grade for
fall of 2014.

CAMP INCLUDES: Free Camp T-shirt,
Refreshments, Individual Instruction,
Free Lunch

Coaches are encouraged to attend.



Tuesday, June 24, 2014
Oakridge High School



Contact Information:

Coach Schugars
SchugarsCoach4Life
5745 Harding Ave.
Muskegon, MI 49442
Phone: 231-557-2707
Schugars4FB@comcast.net



2014 **Schugars** **Coach 4 Life**

Kicking, Punting, **and Long Snapping** **Camp**

Tuesday, June 24, 2014
Oakridge High School
5493 Hall Road
Muskegon, MI 49442



AGENDA:

8:30 a.m. — Registration

9:00 a.m. — Stretch / Warm Up

9:15 a.m. — Kicking, Punting,
Long Snapping Drills and Instruction

10:30 a.m. – Popsicle Break

10:35 a.m. – Drills and Instruction

11:15 a.m. – Lunch
You will be provided with two slices of
pizza and a sports drink. (You may
purchase additional items.)

11:40 a.m. — What College Coaches look
for in Special Team Players

12:00 p.m. – Stretching / Warm Up

12:15 p.m. — Kicking, Punting, and
Long Snapping Instruction

1:45 p.m. — Popsicle Break

2:30 p.m. — Kicking, Punting, and
Long Snapping Competition

2:45 p.m. — Camp Awards and
T-Shirts for all campers

3:00 p.m. — Camp Dismissed

**Schugars Coach 4 Life Kicking,
Punting, and Long Snapping Camp**

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Forms may be returned or mailed to:

Coach Schugars
SchugarsCoach4Life
5745 Harding Ave.
Muskegon, MI 49442

Name _____

Age: _____ Grade 2014/2015 _____

Address: _____

Phone: _____

Cell: _____

High School: _____

Coach: _____

T-Shirt size: (circle one)

M L XL XXL



I certify that my child will be examined
by a physician prior to the camp and is
in good health and able to participate in
all athletic events. I hereby release, the
camp and its coaches from any injuries
incurred during the camp. I delegate
the coaches to seek and obtain any
necessary medical care and treatment
for the best interests of my child's
health.

Parent or Guardian Signature:

X _____

Date: _____

**EMERGENCY CONTACT DURING
CAMP TIMES:**

Name: _____

Address: _____

Phone: _____

Cell: _____

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Oakridge High School**

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