

## 2016 Flier Football

### 2016 Flier Football Schedule

August 2 Tiffin—Home  
September 2 Ashland—Away  
September 9 Bellevue—Away  
September 16 Toledo Bowsher—Home  
September 23 Perkins—Away  
September Oak Harbor—Home  
October 7 Edison—Home  
October 14 Port Clinton—Away  
October 21 Huron—Home

October 28 Vermilion—Away



## Points of Emphasis

- Drills
- Position Skills
- Special Teams
- Punt, Pass and Kick
- Agility drills and fundamentals will be introduced
- HAVE FUN!
- To foster a love for the game of football.

### Clyde High School

Varsity Football  
1015 Race Street  
Clyde, Ohio 43410  
Ryan Greenslade, Athletic Director

**Flier Football Foundation**  
[Http://www.flierfootballfoundation.org](http://www.flierfootballfoundation.org)

## Clyde Flier Football Camp 2016

July 26th-28th

From 6-7:30 at the Clyde High School  
Football Locker room Area  
Registration 5:00 on July 26  
**Helmet Fitting July 28 at 4:00**  
**Camp on Thursday 5-6:30**



# Clyde Flier 2016 Football

## 5th Grade Coaches

Aaron Wilson  
Brian Meyer  
Scott Boyd  
Allen Kauble

## 6th Grade Coaches

Jose Leal  
Chris Beachler



## What to Wear

Attire should include T-shirt, shorts, and sneakers. You may bring football shoes but make sure you have tennis shoes as we may have to use gym on a rainy day.

## Cost Includes

Clyde Flier Practice Jersey. Overall cost include 5th/6th grade football fee. \$100. Early Discount June 15th \$95

## Registration Deadline

July 22, 2016 (Can register first night of camp at 5:00 pm)

## Checks Payable to

FLIER FOOTBALL FOUNDATION

## Send Checks or Money orders to:

5th/6th grade Football Camp

1015 Race Street  
Clyde, Ohio 43410  
Questions? Call Ron Mortan  
330-307-9118

Ryan Carter Head Football Coach  
rcarter@clyde.k12.oh.us

Ryan Greenslade, Athletic Director

419-217-2225

# Flier Football 5—6 Football Camp Registration Form July 26-28

Sign up for:

One Child

Price

\$100

Subtotal: \_\_\_\_\_

Total: \_\_\_\_\_

Please Check here if you wish to pay cash—Please pay first

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone \_\_\_\_\_

## Jersey Size

Youth—Medium Large

Adult - Small Medium Large XL XXL

MY CHILD IS IN GOOD HEALTH AND MAY PARTICIPATE IN ALL CAMP ACTIVITIES. IN THE EVENT IF ILLNESS OR INJURY, I HEREBY AUTHORIZE MEDICAL TREATMENT. I WILL NOT HOLD CLYDE -GREEN SPRINGS SCHOOLS OR ITS EMPLOYEES LIABLE IF SAID CHILD IS INJURED PARTICIPATING IN THE CAMP

Parent/Guardian Signature \_\_\_\_\_

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