

# **Falcon Youth Football Non-Contact Camp**

**July 8th – July 11th**

**7:00pm – 9:00pm at Veterans Field**

**Saddle Brook Residents grades 1 – 8**

**Tuition “FREE”**

## **CAMP DIRECTORS:**

**Matt Occhipinti - Ramapo H.S.**

**John Linari – St Joe’s Regional H.S.**

## **Camp Objectives**

The camp will provide young players with skill instruction and structured drills in all of the basic fundamentals of football. Players will experience all positions on both offense and defense and compete in football related games.

## **What to Bring**

Campers should bring sneakers or football shoes, shorts, T-shirt, and water. Water breaks will be provided for all campers during each session.

**This program is not sponsored by the  
Saddle Brook Board of Education**

## **Camp Staff**

The camp will be run under the direction of Ramapo High School Assistant Head Coach/Defensive Coordinator Matt Occhipinti, and St. Joe's Regional High School Assistant Head Coach/Defensive Line Coach, John Linari. Coaches

Occhipinti and Linari have over 30 years experience in coaching athletes all levels, including youth, high school, and collegiate camps as well. Both are currently educators and coaches with multiple state championships at the high school level. Coaches Linari and Occhipinti will be assisted by the members of the Saddle Brook Falcon Football coaching staff, as well as players and coaches who will make guest appearances to coach and speak to the campers. There will be an Athletic Trainer on the field at all times. Registration is open immediately! Send in your registration form ASAP.

Any questions please call: Saddle Brook Football  
Commissioner Dan Dibella @ 201-375-2967

**This program is not sponsored by the  
Saddle Brook Board of Education**

# REGISTRATION FORM

Name \_\_\_\_\_

Street \_\_\_\_\_

Phone \_\_\_\_\_

Parent Email \_\_\_\_\_

Grade \_\_\_\_\_

Are there any special health considerations of which we should be aware? \_\_\_\_\_

Yes \_\_\_\_\_ No If yes, please explain \_\_\_\_\_

I \_\_\_\_\_ hereby certify that my son is in good health and may participate in all camp activities. In case of emergency I grant permission for my son to be treated at a local hospital. I also understand and accept the risk of serious injury inherent in any football related drill or game situation.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Emergency Phone # \_\_\_\_\_

Send all registration forms to Dan DiBella 237 Wilson Street,  
Saddle Brook.

**This program is not sponsored by the  
Saddle Brook Board of Education**