

# HASTINGS FOOTBALL



## **CONFERENCE CHAMPS:**

**1976,1978,1980,1981,1984,  
1991,1992,1995,1998,1999**

## **PLAYOFF APPEARANCES:**

**1991,1992,1993,1995,1998,1999,2004,2009**

## **REGISTRATION FORM**

### **OR ONLINE AT**

**[www.hastingsfootballcamps.com](http://www.hastingsfootballcamps.com)**

### **REGISTER FOR:**

- ☐ **8 MAN TEAM CAMP (COMMUTER) \$110**
- ☐ **8 MAN TEAM CAMP (OVERNIGHT) \$140**
- ☐ **11 MAN TEAM CAMP (COMMUTER) \$110**
- ☐ **11 MAN TEAM CAMP (OVERNIGHT) \$140**

**NAME:**

**ADDRESS:**

**CITY: ST: ZIP:**

**PHONE:**

**PARENTS NAMES:**

**CONTACT INFORMATION:**

**PLEASE MAKE CHECK PAYABLE TO MATT FRANZEN**

**PLEASE SEND COMPLETE FORM AND CHECK TO:**

**HASTINGS COLLEGE ATHLETIC DEPARTMENT**

**ATTN: MATT FRANZEN**

**710 TURNER AVE HASTINGS, NE 68901**

- ☐ **CASH**
- ☐ **\$50 DEPOSIT**
- ☐ **CHECK**
- ☐ **FULL PAYMENT**



# HASTINGS COLLEGE FOOTBALL TEAM CAMP 2021



**LLOYD WILSON FIELD  
HASTINGS, NE**

**11-MAN  
JUNE 13<sup>TH</sup>-15<sup>TH</sup>**

**8-MAN  
JUNE 17<sup>TH</sup>-19<sup>TH</sup>**

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**WAIVER OF LIABILITY AND HOLD HARMLESS  
AGREEMENT**

I, as parent or guardian, hereby request  
that you accept the application for  
enrollment of \_\_\_\_\_

\_\_\_\_\_ in  
Hastings College Team Camp during the  
dates set forth in the application and in  
consideration of your acceptance of this  
application I hereby release and discharge  
the camp staff and Hastings College and its  
officers, agents and employees from and  
against any and all liability or causes of  
actions arising out of or in connection with  
my dependent's participation in the Camp. I  
further acknowledge that participation in  
any sports related camp involves the risk of  
injury and represent that I have adequate  
insurance coverage to insure that risk. I  
also hereby authorize the director of this  
Camp to act for me according to his/her  
best judgment in any emergency requiring  
medical attention.

By my signature below, I agree to  
indemnify and hold harmless the Camp staff  
and Hastings College from any any loss,  
liability, damage or costs, including court  
costs and attorneys' fees, that they may  
incur due to my dependent's participation in  
this camp.

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

Date \_\_\_\_\_

Print

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

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**CAMP SCHEDULE**

Day 1	10:00 am	-RESIDENT
	12:00 pm	REGISTRATION
	12:45 pm	COMMUTER
		-REGISTRATION
	1:30 pm	-PRACTICE #1
Day 2	5:00 pm	-DINNER
	6:15 pm	-PRACTICE #2
	7:30 am	-BREAKFAST
		(OVERNIGHT
	8:30 am	CAMPERS)
Day 3	12:00 pm	-PRACTICE #3
	1:40 pm	-LUNCH
	5:00 pm	-PRACTICE #4
	6:15 pm	-DINNER
		-PRACTICE #5
Day 3	7:30 am	-BREAKFAST
	8:30 am	-PRACTICE #6
	10:00 am	-AWARDS AND CHECKOUT

**WHAT TO BRING:**

**FULL PADDED PRACTICE GEAR,  
SHORTS/T-SHORTS CLEATS, TENNIS  
SHOES, SLEEPING BAG OR  
BEDDING, TOILETRIES**

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**COACHING STAFF**

**NEW HEAD COACH MATT FRANZEN  
HAS PLANS ON REBUILDING A GREAT  
WINNING TRADITION AT HASTINGS  
COLLEGE FOR YEARS TO COME.  
RETURNING TO RECRUITING LOCAL,  
TALENTED STUDENT ATHLETES, THIS  
CAMP WILL BE A GREAT OPPORTUNITY  
TO LEARN FROM OUR STAFF.**

**MATT FRANZEN – HEAD COACH**

**COACH FRANZEN, HAVING OVER  
TWENTY YEARS OF COACHING  
EXPERIENCE, ELEVEN AS A HEAD  
COACH, HAS LED MULTIPLE TEAMS TO  
THE PLAYOFFS. HASTINGS BOASTS TOP  
OF THE LINE FACILITIES WHERE  
DEVELOPMENT OF STUDENT ATHLETES  
IS A TOP PRIORITY FOR THE  
PROGRAM. THE HASTINGS STAFF IS  
ROUNDED OUT BY:**

**EJ VALENTINE – DEF. COORDINATOR  
JOHN GRINDE - OFF. COORDINATOR  
JEFF MERRITT – DEF. SECONDARY  
WADE FLEISCHER – RUNNING BACKS  
PAT MCCAULEY – CORNERS  
WILLIE FAIR - LINEBACKERS**