## 2011 "Boys of Summer"

## Youth Baseball Camp

June 16<sup>th</sup> & 17th

We will start at 5:30pm-8pm on Thurs the 16<sup>th</sup> and

Noon -2:30pm on Friday the  $17^{\text{th}}$ .



## (This Camp is Open to Players 7 - 14 years of age)

This camp is designed to instruct and assist baseball players in the areas of defensive position play, hitting and base running. Instructors for this year's camp will consist of the coaches from the North Jackson American Legion & Jr. State Programs as well as Former Coaches and Players. Player's from these teams will also assist at the camp.

## **CAMP HIGHLIGHTS**

We will be selecting the best camper from 1 of 3 age groups to be honored between games at the Legion double header that will be held the last day of camp on the 17<sup>th</sup>! All Campers get in free to the games if they wear their camp t-shirt.

Infield * Stance & start positioning * Throwing & catching mechanics * Ground ball fielding footwork & mechanics * Fly ball mechanics * Footwork around bases		* Pr * Si * Co	ting mechani oper hitting m uational hittir ount hitting	cs to increase ientality & philo ig e player can us	osophy			
Outfield * Stance & start positioning * Throwing & catching mechanics * Ground ball fielding footwork & mechanics * Fly ball mechanics			Base Running * Running mechanics & technique * Leads from each base * How to run out various balls hit * Proper leads & jumps (steal vs. hit & run, etc.)					
"Boys of Summer" Baseball Ca Mail w/ Check or Money Order 1635 Brownsboro Hwy. Eagle Point, day of Camp. Each child will be	r payabl OR 9752	e for \$40 to 4 or bring	North Jac payment &	k this portio	on of fo	orm with you	to first	
Player Name:		_ Age:	Posit	ions Played: _				
Address:	_ City:			State: _	<u>.</u>	_ Zip:		
Parent's Name(s):			Emergency	Phone/Cell #:				
T-Shirt Size (Please circle size): Youth: M	L	Adult: S	ML	XL XX	(L			
1. I herby recognize and assume that participation in this p behalf in accordance with their best judgment in the case of accident or injury while participating in the above program	of injury or a	n emergency. I	ecognize that al	l other participatio	ng agencie	s are not held liable	for any	

accident or injury while participating in the above program, and that in the event of an injury to myself and/or my child the Boys of Summer Baseball Camp Staff or Director, North Jackson American Legion or Jr. State Baseball, Eagle Point Youth Baseball and School District #9 are not held responsible for reimbursement or medical expenses resulting from such accident or injury.

2. By signing this assumption of risks and liability release, I acknowledge that I have read its contents and disclosures, that I understand its contents and disclosures, and that I agree to its terms. I furthermore authorize the Boys of Summer Baseball Camp Staff to act for me in accordance with their better judgment in the case of an injury or emergency. (signature required for participation)

Date