**2021**

**Summer Baseball Camp**

|  |
| --- |
| **When: Tuesday, June 15th – Thursday, June 17th**  (Friday. June 18th will be our rain makeup day if needed)  **Time:** 10:00 am to 12:00 pm  **Who:** All Boys and Girls - Ages 5 to 14  **Where: Martinsville High School Baseball Field**  **What To Bring:** Baseball Glove, Baseball Bat, Baseball Hat, Tennis Shoes, Baseball Cleats, Registration Form and Money  **Special Event:** Martinsville High School Alumni Game - Wednesday, June 16th at 6:00pm |

|  |
| --- |
| **Cost: $40.00 per camper and $30.00 each additional sibling**  **Make Checks Payable to: Adam Peterson** |

|  |
| --- |
| **Camp Instructors:**   * Martinsville High School Baseball Coaching Staff * Martinsville High School Baseball Players   **Instruction Will Include:**   * Pitching Mechanics * Throwing Progressions * Defense * Hitting Mechanics * Baserunning |

***Camp registrations will be fully refunded if there is a cancellation due to Covid-19***

**---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------**

**Baseball Camp Registration Form**

(Please Print)

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age/Grade:\_\_\_\_\_\_\_\_\_\_Shirt Size:\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Emergency Contact Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***I/We do hereby present to the Martinsville Baseball Camp this Waiver of Liability and do hereby waive any and all rights and claims against the Martinsville Baseball Camp and its instructional staff. I/we do further agree to indemnity and save harmless the Martinsville Baseball Camp and its staff from any liability whatsoever arising from injuries suffered as a participant of the camp. It is agreed that this Waiver of Liability is submitted as an inducement to enroll.***

Parent/Guardian Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Mail Registration To: Martinsville High School C/O Coach Adam Peterson 1360 East Gray St. Martinsville IN 46151***