

BEARCAT BASEBALL CAMP

MAY 29-31, 2018

<p>Application Deadline: May 24</p> <p><u>You are NOT guaranteed a t-shirt at the time of the camp, unless forms are turned in by this date. Walk ups are welcome.</u></p> <p>Fill out and mail along with check for total amount to: Henrietta All Sports Club PO Box 333 Henrietta, TX 76365</p>
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Camp Location: Henrietta High School Baseball Field

Ages: 6-14 (anyone entering 9th grade next year may come)

Times and Sessions:

Age 6-9:	HITTING 9am-10am	PITCHING 10am-11am	FIELDING 11am-12pm
Age 10-14:	PITCHING 9am-10am	HITTING 10am-11am	FIELDING 11am-12pm

What to Bring: Glove, Bat, Cleats, Batting Helmet, Water

Camp Cost: \$20 per session (\$60 total for all three sessions)

Concessions: We will have a concession stand available: drinks, popsicles, candy, etc.

*** Friday June 1st will be a make-up day in the event we get rained out a day during the week**

Name _____

Address _____

City _____

Age at Time of Camp _____ Session (circle one) **HITTING PITCHING FIELDING**

Phone _____ Emergency Contact _____

CAMP T-SHIRT INCLUDED IN COST. PLEASE CIRCLE T-SHIRT SIZE

YS YM YL AS AM AL AXL AXXL

CONTACT: Kyle Sims-Head Baseball Coach-Henrietta High School

940-257-1110 OR kyle.sims@henrietta-isd.net

***Please fill out waiver on the back side**

RECOGNITION AND ASSUMPTION OF RISK AGREEMENT

MUST BE SIGNED AND RETURNED WITH APPLICATION

I (we) hereby release the Bearcat Baseball Camp and its employees, HISD, its Board of Directors, administration, and employees, from all claims from injuries or illnesses which may be sustained by my (our) child, and authorize the director or his designee to select hospital facilities and/or physicians of his choice, and authorize treatment of the named camper on an emergency basis in the event such treatment becomes necessary while attending the Bearcat Baseball Camp.

Name of Camper_____

Parent/Guardian_____

Parent/Guardian Phone #_____

Parent/Guardian Signature_____ Date_____

*Please call 940-257-1110 if you have any questions

FOR OFFICE USE ONLY:

Amount Paid_____ Check # _____ Cash_____