

2010 Sunday Baseball Skills & Drills Clinics
Sundays 1:00pm-3:00pm

Ages 6- 16

\$25.00 per Session
Grouped by skill /age levels

Come to one session or all - it's a great way to get ready for the upcoming season.

Each session will feature one hour of skill development drills and one hour of hitting drills.

Skill development areas will change from week to week.

The Clinics take place in the Linn-Benton Activity Center (Gym).

Bring tennis shoes, glove, bat, batting helmet, and enthusiasm.

For more information call Harvey Miller Associate Coach LBCC, (541)917-4295

Session 1:
February 7, 2010
Throwing/Catching
Bunting/Hitting

Session 2:
February 14, 2010
Fielding ground balls
Throw/Catching
Bunting/Hitting

Session 3:
February 21, 2010
Infield play/Double play
Bunting/Hitting

Session 4:
February 28, 2010
Pitching/Catching
Infield play/Run Downs
Bunting/Hitting

Mail cheks & registration to:
LBCC Foundation/Baseball
Athletic Dept.
6500 Pacific Blvd SW
Albany, OR 97321

I hereby register my child for the LBCC Baseball Camp and authorize the staff to direct him in participation of camp

activities. I know of no mental or physical problem that may affect his ability to safely participate in this camp. I authorize the camp staff to attend to any health problem or injury to my child that may occur while attending the camp. I hereby release and hold harmless the LBCC Baseball Camp, its employees, agents, and assigns from any liability that may arise from my child's participation in the camp. I acknowledge that I am responsible for any and all medical expenses due to my child's illness and that the LBCC Baseball camp carries only accident insurance, which is secondary to my own insurance.

I authorize all medical, surgical, diagnostic, and hospital procedures as may be preformed or prescribed by a treating physician for my child if I cannot be reached in case of an emergency.

Parent/Guardian signature: _____

Name of Athlete: _____

Athlete's age: _____

Position: _____

Address: _____

City: _____

Phone: _____

Emergency Phone: _____

Parent's Name: _____