

CAMDEN RIVERSHARKS INSTRUCTIONAL BASEBALL CAMP

LOCATION: To be held at Campbell's Field, 401 N. Delaware Avenue in Camden, NJ. Easily accessible to residents of Southern New Jersey, Trenton area, Northern Delaware, Philadelphia and its suburbs. Convenient to Patco Hi-Speed Line and NJ Transit Riverline.

DATES & TIMES: Each instructional program consists of 3 sessions, 9AM- 3 PM.

Session 1: Wednesday, June 27th– Friday, June 29th ***Special baseball and softball session**

Session 2: Monday, July 23rd-Tuesday, July 24th and Thursday, July 26th-Friday, July 27th

Session 3: Monday, August 6th – Thursday, August 9th

REGISTRATION DEADLINE: First come/first served basis - space is limited - Full payment is required in advance to guarantee spot.

COST: \$180 per session per camper. Each camp includes: full use of athletic center facilities, individual and group instruction, lunch daily, an official Camden Riversharks Baseball Camp T-shirt, and a Riversharks Kids Club Membership presented by Pizza Hut.

PLEASE NOTE: CAMP FEE IS NON-REFUNDABLE, BUT MAY BE APPLIED TO A FUTURE CAMP.

***June 27th -June 29th 3-day session is priced \$150 per camper.**

PROGRAM: This program is designed for players from ages 8 to 18 of all ability and experience levels who love the game, have a strong desire to improve their skills, and wish to get a jump on the upcoming season. During instructional sessions, players will be grouped according to their age and/or ability in order to attend to each individual's development. Under the direction of quality instructors using diverse and innovative instruction, each player will be given the individual attention necessary to improve their skills; **instructor to student ratio is approximately 1:7.**

FACILITIES AND SKILL DEVELOPMENT: Available facilities include: an indoor batting cage, hitting skills areas, tees, "soft-hands" training aids, pitching machines and indoor bases. Program drills will include: Tee and soft toss drills, short toss, bunting and live hitting in the batting cages. Pitchers will emphasize proper mechanics, control. Catching, infield, outfield, and base running skill sessions along with arm strength, flexibility, running speed, quickness, agility drills and injury prevention will be conducted for all participants.

PERSONAL EQUIPMENT: All players should **CLEARLY MARK THEIR PERSONAL EQUIPMENT** in advance of attending camp. All players must provide their own glove, gym shoes, cleats, and should **wear a protective cup**. Helmets will be provided or you may bring your own. **Catchers must wear a protective cup** and are encouraged to bring their own equipment.

CAMP DIRECTOR:

JOHN WINK: HEAD BASEBALL COACH / PITCHING COACH,

CAMP STAFF INCLUDES:

Members of the 2012 Rutgers-Camden Baseball Team.

**APPLICATION FOR THE CAMDEN RIVERSHARKS
INSTRUCTIONAL BASEBALL CAMP**

NAME: _____ AGE: _____ DATE OF BIRTH: _____
STREET ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____ HOME PHONE #: _____
PARENT/GUARDIAN NAME: _____
DAY PHONE#: _____ EMAIL ADDRESS: _____
SCHOOL: _____ COACH'S NAME: _____ COACH'S PHONE #: _____
GRADE IN SCHOOL: _____ PREFERRED DEFENSIVE POSITION: _____ **BAT: R L S THROW: R L**
HEIGHT: _____ WEIGHT: _____ SHIRT SIZE (ADULT SIZES ONLY): SMALL MEDIUM LARGE X-LARGE
(34-36) (38-40) (40-42) (46-48)
CAMP SESSION: (June, July, or August) _____

EMERGENCY MEDICAL AND INSURANCE INFORMATION:

ALL PARTICIPANTS MUST BE COVERED UNDER A HEALTH INSURANCE POLICY WHILE ATTENDING THE INSTRUCTIONAL CAMP.

PLEASE COMPLETE THE FOLLOWING:

HEALTH INSURANCE COMPANY: _____
POLICY NUMBER: _____ GROUP NUMBER: _____
PERSON TO CONTACT IN CASE OF EMERGENCY: _____
EMERGENCY PHONE #: _____
CAMPER'S KNOWN MEDICAL CONDITIONS: _____
CAMPER'S FOOD ALLERGIES: _____

PARENT AUTHORIZATION AND GENERAL RELEASE FROM LIABILITY

I understand that the clinic includes instructional sessions in all facets of I am fully aware that baseball is a hazardous sport where injuries and/or death can occur. I accept these risks and agree to hold harmless BKK Sports, LCC, Camden Riversharks, its employees, representatives and agents from all injuries that occur during my son/daughter's participation in this camp.

In the event of any injury or illness, all reasonable efforts will be made to contact the Parent/Guardian to obtain authorization for medical treatment. Where Parent/Guardian cannot be contacted or in case of an emergency, BKK Sports, LCC will obtain the necessary medical treatment for the health of my child.

I understand that BKK Sports, LCC does not provide Medical Insurance coverage for participants of the Baseball Clinic. The Parent/Guardian must provide proof of Medical Insurance coverage prior to the participant's arrival at the clinic. I also agree that my son/daughter is in good mental/physical health to participate in this clinic.

I hereby voluntarily consent and give permission for my son/daughter to participate in the Camden Riversharks Baseball Camp. I agree to indemnify and hold harmless BKK Sports, LCC, Camden Riversharks, its employees, representatives and agents, from any and all claims caused by my son or daughter.

THIS WAIVER HAS BEEN READ AND UNDERSTOOD AND IS SIGNED VOLUNTARILY BY ME AS THE LEGAL REPRESENTATIVE FOR THE PARTICIPANT.

PARENT OR GUARDIAN'S SIGNATURE: _____ DATE: _____

MAKE CHECKS PAYABLE TO: Camden Riversharks

MAIL THIS APPLICATION TO: Campbell's Field
ATTN: Kim Perno
401 N. Delaware Ave.
CAMDEN, NJ 08102

To ensure individualized instruction, space in each session is limited
and will be reserved on a first come/first served basis. Early registration is highly recommended.
In the event of inclement weather, camp cancellations, camp make-up dates
and for any further information -

Contact: Kim Perno at (856) 831-0431 or camps@riversharks.com