

YOUNGSTOWN

S T A T E

BASEBALL CAMP SERIES

FALL PROSPECT CAMP

Sunday, Nov. 5 • YSU Watson and Tressel Training Site • YSU Campus

PITCHING & DEFENSE SESSION ONLY

TIME: 10 a.m. - 1 p.m. *(check in at 9:15)*

AGES: Grades 9-12 and JUCO players

- Pitchers will receive proper arm care, injury prevention techniques and the opportunity to throw bullpens in front of YSU's staff
- Elite defensive instruction and drills to take your game to the next level.

HITTING SESSION ONLY

TIME: 2 p.m. - 5 p.m. *(check in at 1:30)*

AGES: Grades 9-12 and JUCO players

- Pro-Style workout
- Elite level offensive instruction
- Hitting drills to take your game to the next level

Refund Policy: All cancellations must be made at least 72 hours prior to camp. There is a \$20 cancellation fee. If you cancel less than 72 hours prior to camp there will be no refund.

Price: \$100 for one session; \$160 for both sessions. Lunch will be provided for campers who attend both. A \$50 discount is available for YSU employees and siblings of registered campers.

Equipment: A t-shirt will be provided. No cleats are permitted.

Camps are open to any and all participants, limited only by number, age, grade level, and/or gender as required by NCAA rules.

Registration Form (Online registration at penguinscamps.com)

Name: _____ Grade: _____ Position: _____

Home Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

T-Shirt Size: S M L XL

**Make checks payable to YSU Baseball Camp. Mail payment, registration form and waiver/release form to:
YSU Baseball | One University Plaza | Youngstown, OH 44555**

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Parent Waiver and Release Form

Please Print

Camper's Name: _____

Parent's Medical Insurance Carrier: _____

Insurance Group #: _____

Insurance Policy #: _____

I am aware of the risks, hazards and inherent dangers that may arise due to my child's participation in the Youngstown State University Youth Camp held at Youngstown State University (collectively referred to as "UNIVERSITY"):

In consideration for _____ being allowed to participate in said activity, it is agreed that all risks attendant to watching and/or participating in camp activities, including, but not limited to bodily injury, are assumed by the camper and his/her parents and/or legal guardian as indicated by the signature hereto. I hereby certify that the above named camper is physically able to participate in the camp and that I know of no physical impairments which would in any manner limit his/her participation in the program.

I, for myself, and on behalf of my child, hereby release, waive and discharge UNIVERSITY, its instructors, agents and employees from every claim, liability or demand of any kind sustained, whether caused by the negligence of the UNIVERSITY or otherwise. This release shall be binding upon any heirs, administrators, executors and assigns of mine. I further agree to indemnify the UNIVERSITY from any loss, liability, damage or cost it may incur due to my participation in said activity in any way whether caused by the UNIVERSITY or otherwise. I also certify that I am the legal parent or guardian of the above named camper and have full right to provide the release.

In the event of illness or injury resulting or arising directly or indirectly out of said activity, I hereby give my consent and authorization for (1) the administration of emergency first aid care and treatment at the scene of an emergency by faculty, staff members or volunteers of UNIVERSITY or (2) the administration of any treatment deemed necessary by a licensed physician or dentist and (3) the transfer to any hospital reasonably accessible.

Signature of Parent/Guardian: _____

Name of Parent/Guardian: _____

Date: _____