

YOUNGSTOWN

S T A T E

BASEBALL CAMP SERIES

PRACTICE WITH THE PENGUINS

Sunday, Feb. 11, 2018 • YSU Watson and Tressel Training Site • YSU Campus

Time: Sunday, Feb. 11, 2018
1 - 3 p.m. (12:30 p.m. check-in)
3 p.m. — Autograph session with the
YSU baseball team

Cost: Free

Location: Watson and Tressel Training Site
(YSU Campus)

Ages: 6-14

Description: The camp will cover basic skills and techniques led by YSU Baseball Staff and Players. Age-specific drills will also be incorporated. It will give the campers a chance to do the same drills done by YSU Baseball players in practice.

Camp Attire: Baseball attire, glove, bat, helmet and tennis shoes (no spikes). YSU Baseball will provide helmets if necessary.



*All YSU camps are open to
any and all entrants.*

Registration Form (Online registration at penguinscamps.com)

Name: _____ Grade: _____ Position: _____

Home Address: _____ City/State/Zip: _____

Phone: _____ Email: _____

Emergency Contact: _____ Phone: _____

YOUNGSTOWN STATE

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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: _____