



BASEBALL

Westview High School Youth Baseball Camp

Ages 7-14

March 12th & 13th, 2011

@ Westview High School

ABOUT THE CLINIC

This Westview High School Baseball Clinic will provide players ages 7-14 an opportunity to strengthen their baseball skills in all areas of the game.

CLINIC STAFF

Participants will have the opportunity to learn from Westview's head coach, Steve Antich, as well as the Varsity baseball team. Greg Cero of Mound Time Instruction will be available for optional pitching instruction.

PARTICIPANTS SHOULD BRING

Baseball participants should bring tennis shoes, cleats, glove, bat, and catching equipment (if applicable).

COST (Includes a camp t-shirt)

\$65.00 – Both Sessions

\$45.00 – One Session

\$15.00 – Additional 40 minute pitching session
with Greg Cero of Mound Time
(following Saturday's session only)

Cub Camp (ages 7-9) 8:00am-10:30am

Cat Camp (ages 10-12) 11:00am-1:30pm

Jr. Wildcats (ages 13-14) 2:00pm-4:30pm



Registration

Westview High School Youth Baseball Camp Registration

Name of Participant _____ Age _____

Participant's School _____ Email _____

Shirt Size: Youth M L XL Adult S M L XL

Please Circle the Clinic Cub Camp Cat Camp Jr. Wildcats
you are registering for: Ages 7-9 Ages 10-12 Ages 13-14
8:00am-10:30am 11:00am-1:30pm 2:00pm-4:30pm

Please check the day(s) the participant will be attending

_____ Saturday & Sunday **\$65.00**

_____ Additional 40 minutes pitching session with Greg Cero **\$15.00**

_____ Saturday, March 12th only **\$45.00**

_____ Sunday, March 13th only **\$45.00**

Please make checks payable to Westview High School Baseball and mail completed forms to Kristin Antich 17214 NW Widgi Creek Ct., Beaverton OR, 97006 (space is limited)

INSURANCE RELEASE FORM:

I hereby authorize my child's participation in the Westview High School Youth Baseball Camp. I know of no mental, physical problems which may affect my child's ability to participate. I understand that my child must have current and active medical insurance before he may attend camp. Neither I nor my child will hold Westview High School or baseball camp staff liable for any injuries or expenses relating to injuries while my child is at camp.

Insurance Carrier & Policy # _____

Signature of parent/guardian

Date

In case of an emergency, please notify:

Name: _____ Phone: _____



****Any further questions please contact Kristin at skantich@msn.com**

*****All Westview JBO and Suncreek Little League Coaches are invited to watch (free of charge)**