## **Lawrence University Baseball Skills Camp**

Who:	9 <sup>th</sup> – 12 <sup>th</sup> grade	Cost:	\$20 per session				
When:	September 20, 2015 Session 1: 2:30pm - Session 2: 4pm		per 3, 2015 1: 9:30pm - Session 2: 1:	Or 1am	October 24, 201 Session 1: 9:30pm - Se		
Where:	Alexander Gymnasium	mnasium 1100 E South River Street, Appleton WI					
What:	nat: Session 1: Hitting Skills Session 2: Pitching Skills			5			
Contact Head Co	pach Jason Anderson at 920-8	32-7346 or e	mail <u>jason.m.ander</u>	son@lawrence	<u>.edu</u> with questions		
Find our brochu	re online at: http://www.law	vrence.edu/a	thletics/baseball/				
	Registration For						
Please detach f	form and mail with payment to: Lo				•	ppleton WI 54911	
Camper Name:			ess:		Circle the Courses you will take		
Phone:	School:			Grade:	Session 1	\$20	
	P	arents Name	es:		Session 2	\$20	
		Baseba	ll Health Certific	ate			
Camper's Name	e:	Birth Date	://	Family	Physician:		
I certify that this stude tetanus shot, medication	nt is in good physical condition and is ons, allergies, etc.)	physically able t	o participate in baseball	camp activities. M	edical Information: (pleas	e include date of last	
Date:	Signed:				_		
		(Signatur	e of Parent, Guardian	or Doctor)			
	ne directors of the camp to act fo ne camp from any liability for any			t in any emerger	ncy requiring medical at	tention and I hereby	
Signature of Parent or Guardian Place of			f Employment Work o		r Daytime Phone		
Insurance							
Each camper must b	e covered by their own family ins	surance.					
The name of our me	The name of our medical insurance company is Policy Number						