

# TIVY BASEBALL CAMP

June 5 – June 7, 2017

The Tivy Baseball Coaches are putting on a Baseball Camp on June 5th – 7th, 2017. The camp will run from 9 A.M. – 12 P.M. all three days. It is designed to provide basic instruction in baseball skills for ages 7 – 15. The camp will be located at the Tivy Baseball Field. The cost of the camp is \$75.00 for 1st child, \$50.00 for 2<sup>nd</sup> and 25.00 for the 3<sup>rd</sup> and includes a camp T-shirt. **The price on the day of the camp will be \$80.00.**

In order for us to know how many athletes will be participating, please fill out the following information and mail with payment to:

Antler Baseball Camp

Chris Russ

3250 Loop 534

Kerrville, Texas 78028

## **MAKE CHECKS PAYABLE TO KISD**

Deadline for entering is June 3, 2017. Please mail your application and full payment to the Tivy Athletic Office. Come and join the Tivy Coaching Staff at the Tivy Antler Baseball Camp.

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(DETACH AND RETURN)

Tivy Antler Baseball Camp AMOUNT DUE: \$ \_\_\_\_\_

PLEASE FILL OUT THE FOLLOWING INFORMATION:

T-Shirt Size (Youth): M \_\_\_\_\_ L \_\_\_\_\_

T-Shirt Size (Adult): S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ HOME PHONE: (\_\_\_\_) \_\_\_\_\_

SCHOOL: \_\_\_\_\_ AGE: (as of May 1<sup>st</sup>) \_\_\_\_\_

PARENTS NAME: \_\_\_\_\_ WORK or CELL PHONE: (\_\_\_\_) \_\_\_\_\_

PARENT'S E-MAIL: \_\_\_\_\_

DOCTOR'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

I hereby authorize the directors of the Tivy Baseball Camp to act for me according to their best judgment in any emergency requiring medical attention.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

PLEASE SIGN REVERSE SIDE, ALSO



Tivy Antler Baseball Camp Release Form

I HEREBY WAIVE ALL CLAIMS FOR INJURY, DAMAGE, OR LOSS TO MY PERSON AND PROPERTY DURING MY PARTICIPATION IN THE TIVY ANTLER BASEBALL CAMP AND RELEASE THE DIRECTORS AND COACHES FOR INJURY, DAMAGE, OR LOSS WHICH MAY OCCUR DURING THE CAMP. I HEREBY WAIVE THE DIRECTORS AND COACHES FROM ANY LIABILITY FOR INJURY, DAMAGE, OR LOSS WHICH MAY OCCUR.

Participants Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_