

# ST. XAVIER BASEBALL CAMP 2018

Directed by St. Xavier Head Coach Bob Sherlock

**DATES:**, June 4- 7 (Note: Make-up day will be June 8)

**AGE LEVEL:**

Camps are open to boys entering the 4<sup>th</sup>, 5<sup>th</sup>, 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, and 9<sup>th</sup> grades.

**DAILY SCHEDULE (2 sessions daily)**

Session I (Grades 4, 5, & 6): 9:00 a.m. – 11:30 a.m.

Session II (Grades 7, 8, & 9): 12:30 noon – 3:00 p.m.



**REGISTRATION and CAMP FEE:**

Mail this completed registration form, along with check payable to St. Xavier High School, or submit registration online at [stxsportscamps.com](http://stxsportscamps.com). Early registration is encouraged. Camps will be filled on a “first come, first served basis.” The camp fee includes a t-shirt and instruction from the St. Xavier baseball staff. The pre-registered fee is \$90.00 per camper. Walk up registration is permitted provided there are openings. **Credit card payment (MasterCard or Visa) can be accepted only with online registration.**

**CAMP FEATURES:**

Campers will receive instruction in hitting, bunting, baserunning, throwing, infield and outfield play, pitching, catching, and team defensive skills.

**HIGHLIGHTS:**

Hit, Run, & Throw Competition for Grades 3 – 5

Showcase-type evaluation for Grades 6 - 8

For information about camps, contact Bob Sherlock at 513-310-6656 or via e-mail at [bsherlock@stxavier.org](mailto:bsherlock@stxavier.org)

**Cut Along Dotted Line and return registration form with signed medical release**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Entering Next Year: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail address: \_\_\_\_\_

Player’s primary position: \_\_\_\_\_

Grade School Currently Attending: \_\_\_\_\_

**Youth T-Shirt Size (Circle)**            S        M        L        XL

**Adult T-Shirt Size (Circle)**            S        M        L        XL

**TWO WAYS TO REGISTER:**

1) Mail registration form to:            St. Xavier High                    OR            2) Register online: [stxsportscamps.com](http://stxsportscamps.com)  
c/o Bob Sherlock  
600 West North Bend Road  
Cincinnati, OH 45224

Make check payable to: **St. Xavier High School**

**Medical Release Form**

The undersigned further agree(s) and understand(s) that my/our son participates in the St. Xavier High School Baseball Camp at his own risk, and that the undersigned my/our son’s behalf and my/our behalf, assume full responsibility for any injury, loss, damages incurred in connection with said St. Xavier High School Baseball camp. The undersigned also agree(s) to forever release, discharge, and covenant to hold harmless the School, it’s Trustees, teachers, employees, agents and any other parent or volunteer who participates as a chaperone or other assistant in connection with the St. Xavier Baseball Camp, their heirs, administrators, executors, successors, or assigns, from any and all claims, demands, damages, costs, expenses, loss of services, actions and causes of action belonging to the undersigned or the Student that in anyway and at anytime arise out of the Student’s participation in the St. Xavier Baseball Camp

Mother Sign \_\_\_\_\_ Date \_\_\_\_\_ Father Sign \_\_\_\_\_ Date \_\_\_\_\_