

William Woods Baseball Summer Camp

Camp Directors: William Woods University Baseball coaching staff and players

Camp Cost: \$50.00 William Woods Employee Discount: \$40.00

(Camp dues will be accepted on the day of the camp)

Age: Grades K-8

Date: May 28-29 (Tuesday and Wednesday)

Time: 9am – 12pm BOTH DAYS

Activities: Camp will cover all of the fundamental aspects of the game of baseball with high level individual instruction.

Facilities: William Woods Baseball Facility. In case of weather, the camp will be held at the Helen Stephens Indoor Complex.

Baseball Facility Address – 711 Crestwood Drive, Fulton, MO 65251 Helen Stephens Indoor Facility – One University Avenue, Fulton, MO 65251

Contact Information: christopher.fletcher@williamwoods.edu

Ways to reserve a spot –

- 1. Email information below to christopher.fletcher@williamwoods.edu
- 2. Detach and return this sheet with your checks made payable to William Woods Baseball:

William Woods University Attn: Baseball

One University Ave. Fulton, MO 65251

| Name | Birth Date_ | Age | | | |
|----------------------|-------------|----------------|-------|-------|--|
| Address | City | | State | _ Zip | |
| School | Grade | _ T-Shirt size | | _ | |
| Parent/Guardian Name | | Phone # | | | |
| | | | | | |

Waiver

I give my permission for my son/daughter to participate in the William Woods Baseball Summer Camp knowing that it will contain vigorous physical activity, which could lead to injury. I hereby authorize the directors of the Camp to act for me according to their best judgment in any emergency requiring medical attention. I know of no mental or physical problems, which affect my child's ability to safely participate in this camp. I hereby waive and release the William Woods Baseball Camp Staff and William Woods University.

| Parent/Guardian Signature | Data |
|---------------------------|------|
| Parent/Guardian Signature | Date |