

PARENT/GUARDIAN

WAIVER:

I understand that I will provide and pay for all medical treatment for my child/ward and will not hold Gilbert Recreation Department or agents thereof liable for injuries incurred while my child/ward is attending the Gilbert Baseball Camp.

Signature of Parent or Guardian:

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Date:

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You can print more copies of the camp brochure by going to [www.gilbertbaseball.com](http://www.gilbertbaseball.com)

If the weather is a concern, you can also check this site for where the camp will be taking place.

Gilbert Recreation Department

**2017  
Defensive  
Fundamentals and  
Hitting Baseball  
Camps**



**Session I**  
**Defense Camp**  
December 9-10  
Saturday: 10:00-12:00  
Sunday: 1:00-3:00

**Session III**  
**Hitting Camp**  
December 16-17  
Saturday: 10:00-12:00  
Sunday: 1:00-3:00

## WHO MAY ATTEND?

Anyone ages 6 through 8th grade may attend

## CAMP PURPOSE

Campers will be instructed in the basics of hitting and pitching as well as fine-tuning their present skills.

## LOCATION

Camp will be held at Gilbert Recreation Complex Baseball Field.

If there is bad weather, someone will be at the field to provide instructions

## WHAT TO BRING

Gloves  
Caps  
Shoes (Cleats and Tennis Shoes)  
Practice gear/Catcher's Gear  
Helmet/Bat

## Defensive

### Fundamentals

#### Pitchers:

Upper Body Mechanics

Lower Body Mechanics

Fastballs/Changeups

Fielding

Bullpen Work

#### Catchers:

Stances

Receiving/Framing

Blocking

Throwing

#### Position Play:

Fielding Drills

Situations

## Hitting Camp Fundamentals

Stance

Upper Body Mechanics

Lower Body Mechanics

## 2017 Winter Camp Registration Form

- Defensive Camp \$60.00 the day of camp  
 Hitting Camp \$60.00 the day of camp  
(\$50.00 if Pre-Registered)  
 Both Camps \$100.00

\*Due to staffing, there will be no refunds\*

Total: \_\_\_\_\_

\_\_\_\_\_  
Camper's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Parent's Name

\_\_\_\_\_  
Home phone

\_\_\_\_\_  
Work/Cell

\_\_\_\_\_  
Birth date

\_\_\_\_\_  
Age at Camp

\_\_\_\_\_  
Grade

\_\_\_\_\_  
Email Address

Pitcher/Catcher camp only: Please check whether your child will be attending as a ( ) Pitcher or as a ( ) catcher.

APPLICATION MUST INCLUDE  
REGISTRATION FEE.  
PLEASE MAKE CHECK PAYABLE TO  
AND MAIL TO:

ASHLEY BURNETT  
120 OLD CHAPIN ROAD  
LEXINGTON, SC 29072

Questions: please contact me at  
aburnett@sc.rr.com

\*\*Please read and sign the back\*\*