



8 to 12 Year Old Two Day Summer Baseball Camp

San Clemente Little League has teamed up with the Dave Hansen Baseball Academy to host a two day baseball camp on July 8th and 9th.

Dave is a 14 year Major League veteran and Current Hitting Coordinator for the Arizona Diamondbacks. Dave played for the L.A. Dodgers, Chicago Cubs, S.D. Padres and the Seattle Mariners. He has put together a team of instructors that have played or are still playing professional baseball. Your child will learn to play like a professional with positive, quality instruction from Dave and his staff. Your young player will have the opportunity to work on all facets of the game from pitching, catching, to infield, outfield and hitting.

The camp will be held over two days. Day 1 will be individual position and team instruction as well as hitting instruction and practice. Day 2 will be individual position drills, 3 station batting practice followed by an age for level inter squad game.

Your child will need a glove, helmet, bat and Sack Lunch!

So come join SCLL and Dave for a fun couple of days at the ball park!

Ages: 8-12 years old

Cost: \$150.00 T-shirt included

Dates/Times: July 8th and 9th, from 10am-2pm, **please check in at 9:30**

Location: San Geronio Fields

To enroll, send completed application with check or money order made payable to:

San Clemente Little League – Summer Baseball Camp

P.O. Box 84, San Clemente, CA 92674

Enroll early to ensure available space!

Name _____

Date of birth _____

Address _____

City _____ State _____ Zip _____

Home phone _____

Emergency phone _____

Medical Conditions (if any) _____

E-Mail Address _____

I hereby authorize "San Clemente Little League" to act for me in the case of an emergency. I hereby waive, San Clemente Little League, its Directors, Instructors, facility, and any of its officers and agents, from any liability, claim, or action for any, and all damages, or injuries resulting from, or in any way arising from, or in any way arising out of the participation in this camp by the applicant. I accept full responsibility for the above applicant's medical bills, and all other associated expenses as a result of damages, injuries, or illness sustained while in attendance. I understand that the above applicant is attending at his/her own risk.

Please sign _____ **Date** _____