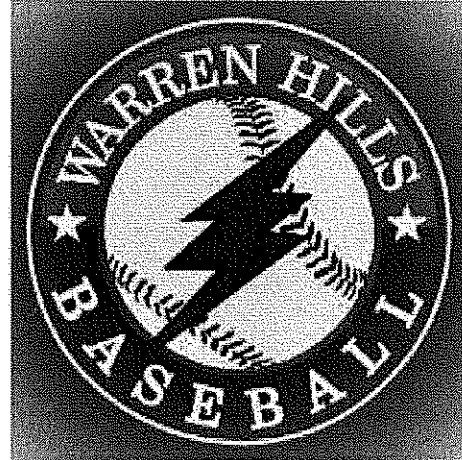


# 2023 Warren Hills Summer Baseball Camp



## Camp Details:

- This camp is a great opportunity for young players to learn from our high school coaches and players. The camp goal is to provide instruction that is focused on the development of skills and knowledge of the game!
- The Warren Hills Baseball Camp staff develops practice plans which include instructional sessions on fundamentals, daily contests and games each day.
- Campers who register before June 11 will receive a camp T-shirt.
- Prizes will be awarded daily!
- Campers should bring a bat, glove, helmet and cleats.

## When:

9:00 to 11:00am Monday, July 24 to Thursday, July 27 (rain date Friday, July 28)

## Where:

Warren Hills High School baseball fields

## Grades:

3rd through 8th grade (2022-2023 school year)

## Cost:

\$100 for the week

Family discounts are available!

2 players for \$180, 3 players for \$270

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*Complete the form and return with a check payable to:*

**Streaks Diamond Club, 4 Van Nest, Oxford, NJ 07863**

Questions? Email [streaksdiamondclub@gmail.com](mailto:streaksdiamondclub@gmail.com)

## Warren Hills Summer Baseball Camp Registration Form

Player's Name \_\_\_\_\_

Position(s) \_\_\_\_\_

Age \_\_\_\_\_ Grade \_\_\_\_\_ (2022-23 school year)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### T-Shirt size (Circle One)

YS YM YL S M L XL

### Parent Contact Information:

Name \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

### Emergency Contact Information:

Name \_\_\_\_\_

Phone # \_\_\_\_\_

### Participant Waiver & Liability Agreement

*I am not aware of any injury, illness or other health related issues that would restrict or limit my child's ability to participate in the summer baseball camp.*

*I agree to assume all risks and expenses due to an injury that may occur as a result of my child's involvement in the summer baseball camp.*

*I agree to hold the Streaks Diamond Club or anyone acting on its behalf either as a coach, a coaching assistant or administrator harmless in the event of an injury to my child while participating under the supervision of the above.*

### Signature of Parent or Guardian

\_\_\_\_\_

Date \_\_\_\_\_