



HIGHLAND YOUTH BASEBALL INSTRUCTIONAL CAMP

WHAT:

THE HIGHLAND BASEBALL PROGRAM INVITES STUDENTS IN GRADES 3-8 TO THE 2ND ANNUAL HIGHLAND YOUTH BASEBALL INSTRUCTIONAL CAMP. PARTICIPANTS WILL RECEIVE INSTRUCTION FROM OUR HIGH SCHOOL BASEBALL COACHES. TWO SESSIONS WILL BE OFFERED; SESSION 1 WILL FOCUS ON HITTING & SESSION 2 WILL FOCUS ON PITCHING. STUDENTS MAY ATTEND SESSION 1, SESSION 2, OR BOTH.

WHEN:

CAMP WILL RUN FROM SUNDAY, APRIL 2 TO SUNDAY, APRIL 30 (4 SUNDAYS, EXCLUDING EASTER ON APRIL 16).

SESSION 1: SUNDAYS FROM 5:00-6:00 PM (HITTING)

SESSION 2: SUNDAYS FROM 6:00-7:00 PM (PITCHING)

LOCATION:

HIGHLAND MIDDLE SCHOOL GYMNASIUM

COST:

SESSION 1: \$60.00 (4 SESSIONS)

SESSION 2: \$60.00 (4 SESSIONS)

SESSIONS 1 & 2: \$100.00 (8 SESSIONS)

FEES MUST BE PAID IN FULL & ARE DUE ON SUNDAY, APRIL 2. WE WILL ACCEPT CASH OR CHECKS PAYABLE TO **HIGHLAND BASEBALL**.

EQUIPMENT:

STUDENTS WILL BE REQUIRED TO BRING THEIR OWN BASEBALL GLOVE & GYM SHOES. PARTICIPANTS ARE ENCOURAGED TO BRING THEIR OWN BASEBALL BAT IF POSSIBLE.

QUESTIONS:

HEAD COACH SETH MILLEDGE: SMILLEDGE@HIGHLANDHUSKIES.ORG OR (515) 979-0391

ASSISTANT COACH CLINT COLBERT: (319) 930-8881

ASSISTANT COACH RYAN RONAN: (319) 541-7713



NAME: _____ GRADE: _____ SHIRT SIZE: _____

WAIVER FORM

I _____ (PARENT/GUARDIAN) CONSENT FOR MY SON OR DAUGHTER TO PARTICIPATE AND RECEIVE INSTRUCTION FROM ANY STAFF MEMBER OF THE HIGHLAND YOUTH BASEBALL INSTRUCTIONAL CAMP AT ANY FACILITY UTILIZED FOR THAT PURPOSE. THE UNDERSIGNED ACKNOWLEDGES AND AGREES THAT: AS THE PARENT AND/OR LEGAL GUARDIAN, I DO HEREBY FOR MYSELF, MY SPOUSE, MY CHILD, AND ON BEHALF OF MY/OUR HEIRS, PERSONAL REPRESENTATIVES, AND ASSIGNS, AGREE NOT TO SUE, AND HEREBY RELEASE, WAIVE, DISCHARGE, HOLD HARMLESS AND INDEMNIFY AND FOREVER DEFEND ALL INSTRUCTORS/STAFF REPRESENTING HIGHLAND YOUTH BASEBALL INSTRUCTIONAL CAMP AND THE INSTITUTION OF HIGHLAND COMMUNITY SCHOOL DISTRICT FROM ANY AND ALL LIABILITY, LOSSES, CLAIMS, ACTIONS, SUITS, PROCEDURES, DEMANDS, RIGHTS AND CAUSES OF ACTION OF WHATEVER NATURE, IN LAW AND EQUITY, KNOWN OR UNKNOWN, FORESEEN OR UNFORESEEN, FOR BODILY OR PERSONAL INJURIES, DEATH AND PERMANENT INJURY, ILLNESS, DAMAGED PERSONAL PROPERTY OR OTHER LOSSES AND ANY CONSEQUENCES THEREOF; INCLUDING EXPENSES, COSTS, AND ATTORNEY'S FEES, AS MAY BE SUSTAINED BY MY CHILD OR ME ARISING OUT OF OR, IN ANY WAY ASSOCIATED WITH MY CHILD'S PARTICIPATION. I UNDERSTAND AND FULLY ACKNOWLEDGE THAT MY CHILD'S PARTICIPATION IN THESE ACTIVITIES ARE SOLELY AT OUR OWN RISK AND I ASSUME FULL RESPONSIBILITY. I HEREBY FURTHER VERIFY THAT MY CHILD IS PHYSICALLY ABLE TO PARTICIPATE IN ALL ACTIVITIES OF THE HIGHLAND YOUTH BASEBALL INSTRUCTIONAL CAMP, WITHOUT LIMITATION. MOREOVER, I HEREBY UNDERSTAND AND AFFIRM THAT ANY CHARGES, INCLUDING DEDUCTIBLES, RELATED TO THE MEDICAL CARE PROVIDED TO MY CHILD WILL BE THE RESPONSIBILITY OF MY PRIMARY INSURANCE CARRIER OR ME.

STUDENT NAME (PRINTED): _____

PARENT/GUARDIAN NAME (PRINTED): _____

PARENT/GUARDIAN SIGNATURE: _____

**RETURN COMPLETED FORM TO HIGHLAND MIDDLE SCHOOL GYMNASIUM ON SUNDAY, APRIL 2, 2017.
REGISTRATION WILL BEGIN AT 4:30 PM.**