

2012

5B's Winter Skills Baseball Camp

Sunday's, March 4th, 11th, 18th, 25th

K-2nd - 1:00 to 2:30 / 3rd -5th - 3:00 to 4:30 / 6th -8th - 5:00 to 6:30

REGISTRATION FORM

Name: _____

Address: _____

City: _____ ZIP Code: _____

Age: _____ Grade: _____ Phone: _____

E-mail Address: _____

T-Shirt size (please specify adult / youth): _____

Person to call in emergency: _____

Emergency telephone(s): _____

Campers should be prepared for outdoor activities when weather and field conditions permit.

LIABILITY WAIVER: Please sign below, indicating knowledge of potential injuries associated with playing baseball, and the release of Zanesville and Tri-Valley high school coaches and players, as well as 5B's Inc. ownership, from any liability from injury which may occur.

Signature: _____

SEND APPLICATION & FEES TO:

5B's Winter Skills Baseball Camp

P.O. Box 3512

Zanesville, OH 43702-3512

FEES: \$60 for individual, or \$100 for 2 players

Please make checks payable to "Zanesville Baseball Boosters" or "Tri-Valley Baseball Boosters"

FOR MORE INFORMATION:

ZHS Baseball Coach Jason Smith: 740-624-1612 (cell)

TVHS Baseball Coach Kevin Yoder: 740-754-2921 (school)

ADMINISTRATIVE USE ONLY:

Payment received

Cash

Check #: _____

T-Shirt