

2017 MISHAWAKA SPRING TRAINING BASEBALL CAMP

What will it take to be one of the elite teams in the state? PRACTICE! PRACTICE! PRACTICE!

The Mishawaka Baseball Program is inviting all baseball players at the middle school and elementary levels to participate in the 2017 Spring Training Baseball Camp. Each player will go through a circuit of stations where they will learn how to improve their hitting, pitching, and defensive skills. This is a similar workout the high school players are practicing in order to get ready for the upcoming season.

Not only do we practice on our baseball skills, but we work on our mental approach to the game and in life. We base our program on the following four factors.

- 1) Expect great things to happen
- 2) Take on more team responsibility
- 3) Develop team power by relying on each other
- 4) Keep it positive

By practicing hard and instilling the four factors will make the Mishawaka Baseball Program successful. We look forward to seeing you at the camp.

The camp will be held at Mishawaka High School in the West Gym. Camper may bring tennis shoes, glove, bat, helmet, and any other equipment they need (**MAKE SURE CAMPER'S NAME IS ON EACH ITEM**). We will supply any missing items. Registration will also be available at the camp.

Please be at least 15 minutes early and enter through the west doors across from the school parking lot. The dates and times are as follows:

February 4, 11, 18, 25

Session 1: Hitting from 11:00 a.m. – 12:00 p.m.

Session 2: Pitching/Defense: 12:00 p.m. – 1:00 p.m.

The cost is \$10 per session, \$20 for the day, or \$65 for all four dates and all 8 sessions. Checks need to be made to Mishawaka Baseball.

PLEASE NOTE: ALL CAMPERS MUST BE SCHOOL CITY OF MISHAWAKA STUDENTS.

Please fill the information below and mail it with your check to:

Mishawaka High School Baseball
Attention: Coach Huemmer
1202 Lincolnway East
Mishawaka, IN 46544

If you have any questions, please call Coach Huemmer at 574-514-1811 or email at huemmerj@mishawaka.k12.in.us.

Player's Name: _____ Age: _____

Parent(s) or Gaurdian(s) Name: _____

Home address: _____

Home Phone Number: _____ Cell Phone Number: _____

School: _____ Grade: _____

Little League or Travel Team: _____

Positions played: _____

By signing this form, you are releasing Mishawaka High School and the Mishawaka Baseball Program from any liability resulting from injury.

Parent or Guardian's signature: _____