

REGENTS HIGH SCHOOL BASEBALL CLINICS Winter 2014

HITTING CLINIC

Date: Sunday, December 21, 2014

Time: 9 a.m. - 12 p.m.

Cost: \$30

Location: Rockford University - Seaver Center
5050 E State St.
Rockford, Ill. 61108

PITCHING CLINIC

Date: Sunday, December 21, 2014

Time: 1 p.m. - 4 p.m.

Cost: \$30

Location: Rockford University - Seaver Center
5050 E State St.
Rockford, Ill. 61108

HITTING CLINIC

Hitters will go through multiple drills to improve their overall hitting. Emphasis will be placed on mechanics, fundamentals, situations and bunting. Each hitter will be evaluated on exit speed, bat speed and fundamentals.

PITCHING CLINIC

Emphasis will be placed on mechanics, enhancing velocity, off-speed pitches and grips, pick-offs and P.F.P. Each pitcher will go through multiple drills to improve his overall pitching performance.

Registration is due by December 18.

Please call for availability after the due date.

Be sure to sign up early as space is limited!

(See other side for more information.)



CLINIC RULES AND REGULATIONS

Participants must abide by the rules and regulations of the 2014 Regents High School Baseball Clinic. Attendees are required to attend all sessions and activities. Any serious violations, intentional damage to property, or other behavior deemed detrimental to the group will result in immediate dismissal. There will be no refund of fees upon expulsion or upon withdrawal from the camp.



GoRegents.com
Rockford University
5050 E. State St.
Rockford, IL 61108

REGISTRATION FORM Regents High School Baseball Clinic, Winter 2014

Please read and sign the release on the back of the form. (Release is required for registration)

Include payment and mail to: Rockford University Athletic Office, Attn. Baseball Clinic, 5050 East State Street, Rockford, IL 61108-2393

For information, contact Shaun Dascher at 815.394.5007 or SDascher@rockford.edu or visit www.GoRegents.com

(Please print. One student registration per form. No registrations will be taken without payment.)

Student name _____ Age _____ Date of birth _____

Grade _____ School _____ Height _____ Weight _____

Parent(s) name(s) _____

Address _____ City _____ State _____ Zip _____

Phone _____ Email _____

High School Hitting Clinic: \$30

High School Pitching Clinic: \$30

Hitting and Pitching Clinic: \$45

I am paying by check. (Make checks payable to Rockford University Baseball.)

I am paying by credit card. MasterCard VISA Discover

Amount \$ _____ Name on card _____ Billing address _____

Card number _____ Security code (from back) _____ Exp. date _____ Signature _____

Rockford University reserves the right to verify information provided on this form.

REGENTS HIGH SCHOOL BASEBALL CLINIC Winter 2014



*Dear Camper,
Thank you for your interest in attending the 2014 Rockford University High School Baseball Clinic. For years, we have offered student-athletes the opportunity to learn and further develop their fundamental baseball skills. We can do the same for you! We will also teach you drills that can easily be done at home during the off-season to maintain your baseball conditioning and skill development. You will learn from a seasoned and tested coaching staff that has many years of experience working with all age levels. I look forward to working with you!*

Sincerely,
Bob Koopmann, Head Baseball Coach



WHAT TO BRING

Individuals should bring practice clothes, glove, clean gym shoes, hat, water bottle, sweatpants/baseball pants, and shorts. Campers should avoid bringing valuables—the Clinic is not responsible for lost or stolen articles.

INSURANCE

All campers must have their own medical insurance. Parent(s) must give permission for camp staff to act on the camper's behalf in case of a medical emergency when the parent(s) cannot be reached.

CAMP STAFF

Rockford University hires coaches who are committed to providing a positive camp experience through the learning of fundamentals of baseball. Rockford University coaches and Regents baseball players will be staffing the clinic.

(See other side for more information.)



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Agreement and release of liability

By signing this agreement, we certify that we are the parents or other legal guardians of the individual whom we are registering for the Regents High School Baseball Clinic and that there are no other parents or legal guardians for this child.

Agreement to follow rules and regulations. We agree at all times to abide by all of the program rules established by Rockford University for its High School Baseball Clinic, and to ensure that our child complies with those rules. We understand and acknowledge that if we or our child fail to abide by such rules at any time our child may be removed from the program.

Release and waiver of liability. In consideration for Rockford University permitting our child to participate in its High School Baseball Clinic we hereby agree as follows:

We agree that Rockford University, its officers, employees, and agents, shall not be liable for any injury to the person or property of our child arising out of or related to our child's presence on Rockford University's premises, his or her participation in any aspect of the Regents High School Baseball Clinic, or occurring while our child is under the care, supervision or responsibility of any Rockford University officer, employee or agent.

We hereby agree to defend, indemnify, and hold harmless Rockford University, its officers, agents, and employees, from and against any claims, demands, actions, losses, or cause of action whatsoever arising out of or related to any injury to person or damage to property of our child while our child is on Rockford University's premises or designated fields, participating in any aspect of the Regents High School Baseball Clinic, and/or under the care, supervision, and/or responsibility of any Rockford University officer, employee or agent, whether such claim, demand, action, loss, or cause of action results from an act or omission, including the negligent acts or omissions, of Rockford University, its officers, employees or agents, or from some other cause, whether foreseeable or unforeseeable.

Consent to medical treatment. In the event that Rockford University, in its sole discretion, determines that there is or may be a medical emergency requiring immediate medical treatment for my child, we hereby authorize any officer, employee or agent of Rockford University to secure and consent to the transportation and/or treatment of our child by any licensed ambulance, physician, hospital, or other medical personnel, and we agree that we shall be financially responsible for payment of any and all such medical transportation and/or treatment.

Important notice – Immunization law. By Illinois state law, students born after 1/1/57, registered for MORE THAN ONE class at a college or university in Illinois, MUST provide proof of immunization against measles, mumps, rubella, diphtheria and tetanus. This information may be obtained from school records or a family physician.

Safe playing environment. Rockford University pledges to provide an opportunity for youth to learn the fundamentals of his/her sport and to develop individually and as a member of the team. We will do our best to provide a safe playing environment and will set an example for fair play and sportsmanship. To this goal, each coach, assistant coach and volunteer agrees to abide by the University's Risk Management Guidelines for Rockford University Employees and Volunteers Working with Youth (copy available upon request).

Consent to photograph. I give Rockford University permission to photograph (still photograph, audio recording, motion picture footage) my minor camper and use such photographs in all media forms, for any and all promotional purposes including advertising, publicity, display, audiovisual, exhibition, commercial or editorial use.

Signature _____ Relationship to child _____

Signature _____ Relationship to child _____