

# Concordia Baseball: Spring Training Clinics



## CONCORDIA UNIVERSITY BASEBALL CAMPS



### Location:

*Concordia University Porter Park*

2811 NE Holman

Portland, OR 97211

Working with Head Coach Rob Vance, Asst. Coaches Garrett DeGallier and James Threw, and current CU players, our goal is to provide exceptional instruction to each camper. These series of camps aim to increase skill and ability for each camper in the following areas: hitting, pitching, fielding, baserunning, and mental game, fully preparing each camper for the upcoming 2018 baseball season.

### Clinic Dates:

Mon, Feb. 5<sup>th</sup>. Tues, Feb. 6<sup>th</sup>. Mon, Feb.

12<sup>th</sup>. Tues, Feb. 13<sup>th</sup>. Mon, Feb. 19<sup>th</sup>.

Tues, Feb. 20<sup>th</sup>. Mon, Feb. 26<sup>th</sup>. Tues,

Feb. 27<sup>th</sup>. Mon, Mar. 5<sup>th</sup>. Tues, Mar. 6<sup>th</sup>.

Monday, Mar. 12<sup>th</sup>. Tues, Mar. 13<sup>th</sup>.

Mon, Mar. 19<sup>th</sup>.

### Cost:

📍 \$30 per session

\*\$370 When purchasing all sessions

### Times:

Mondays & Tuesdays

7:15PM – 9:00PM

Grades 3 - 8

📍 **Sessions are open to anyone. They are only limited by age, grade, and number of participants.**

📍 **Sessions limited to 20 campers per session.**

📍 **Payment is due at door during camp checkin.**

**CONCORDIA**  
BASEBALL



**2018 Cavalier Spring Training Camp Registration Form**

**Please bring this form prior to first camp date attendance**

CAMPER NAME \_\_\_\_\_ AGE \_\_\_\_\_ GRADE \_\_\_\_\_

SCHOOL \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PARENT(S) NAME \_\_\_\_\_ PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

KNOWN ALLERGIES/MEDICALCONDITIONS \_\_\_\_\_

**INSURANCE: Concordia does not provide medical/accident insurance; it is advised that you provide your own.**

MEDICAL INSURANCE COMPANY \_\_\_\_\_

POLICY# \_\_\_\_\_

*I hereby register my son/daughter in the Cavalier Baseball Camp(s). I know of no mental or physical problems which may affect his/her ability to participate in this camp. I hereby release and hold harmless Concordia University and its' employees from any liability that may arise out of my son's/daughter's participation in this camp. I acknowledge that I am responsible for any medical expenses due to my son/daughter's illness and/or injury.*

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please check the camp(s) you wish to attend:**

<u>Camp</u>	<u>Dates</u>	<u>Times</u>	<u>Cost</u>
Cavalier Hitting	Feb 5. Feb 6. Feb 12. Feb 13. Feb 19. Feb 20. Feb 26. Feb 27. Mar 5. Mar 6. Mar 12. Mar 13. Mar 19.	Mon/Tues (7:15PM-9PM)	\$30.00 per (\$370 for all sessions)

\*Total cost if you wish to register for all clinics will be \$370

\*Payment is due at the door prior to camp check in

\*Please make all checks out to Concordia University Baseball

**Please contact Concordia Assistant Coach Garrett DeGallier if questions arise. (425) - 985 - 4984 / degallier@gmail.com**