

# 2021 BETTENDORF BULLDOG BASEBALL CAMP

#### **WHEN**

DAY 1 – Monday, April 26th - 7:00pm-9:00pm – Pitching/Catching

DAY 2 – Tuesday, April 27th - 7:00pm-9:00pm – Infielders/Outfielders

DAY 3 – Wednesday, April 28th - 7:00pm-9:00pm – Hitting

### **LOCATION**

Bettendorf Middle School Gyms

#### **COST**

Each DAY is \$20 but if you sign up for all 3 DAYS your total price is \$50. Registration limited to the first 60 participants each DAY.

#### **FAMILY DISCOUNTS**

If you sign up for all 3 days, the first camper from each family will pay full price and subsequent campers pay \$10 less (For example, a family has 3 campers sign up for baseball camp. The 1<sup>st</sup> camper pays \$50, 2<sup>nd</sup> camper pays \$40 and 3<sup>rd</sup> camper pays \$40)

# **CAMP DETAILS**

The camp will focus on fundamentals of throwing, hitting, infield work, outfield work and pitcher/catcher work. Instruction provided by Bettendorf High School Baseball coaches and players.

# **CAMP QUESTIONS**

Please email Coach Hanna – <u>bettendorfbaseballclub@gmail.com</u>

# BETTENDORF BASEBALL CAMP REGISTRATION FORM

Registration Deadline is April 23<sup>rd</sup> (60 camper limit per day). Athlete's Name: \_\_\_\_\_Age \_\_\_\_ Days you will be attending camp: Day 1\_\_\_\_\_ Day 2\_\_\_\_ Day 3\_\_\_\_ or All 3\_\_\_\_\_ Current School: \_\_\_\_\_ Home Address: Parents Email: Parent/Guardian Name: If unable to reach a parent/guardian, in case of an emergency, contact: Name: \_\_\_\_\_Phone: \_\_\_\_ Medical Information/Release Does the athlete have any medical conditions we need to be aware of? Yes No If yes, please explain: \_\_\_\_\_ I authorize the Baseball coaches at the Bettendorf High School baseball camp to act for me according to their best judgment in an emergency requiring medical attention, and I release Bettendorf Baseball coaches as well as Bettendorf High School from any and all liabilities for injuries, illnesses, or lost property incurred while the above-named athlete is at camp. I have no knowledge of any physical condition that would be affected by the above-named athlete's participation in the camp. Parent/Guardian Signature: Date: Please send your camp registration with a check payable to **Bettendorf Baseball Club** to: Bettendorf High School Baseball Camp 3333 18th St.

Bettendorf, IA 52722