



# ***HARRISON WILDCATS BASEBALL***

## ***2016 Winter Camp***

**Date:** Monday, December 19, 2016 and Tuesday December 20, 2016

**Time:** 9:00 a.m. – 12 p.m. (Walk up registration will begin at 8:30 a.m.)

**Location:** Harrison High School Gym (Old Gym)

**Price:** \$30

**Who:** The camp is restricted to First (1<sup>st</sup>) through Eighth (8<sup>th</sup>) graders.

**Staff:** The Harrison High School baseball staff, players and special guests.

**Description:** The Harrison Wildcats baseball team will host a Winter Camp designed to introduce players to techniques, drills, and the specific fundamentals that outline the Wildcats baseball philosophy.

**Equipment:** Each camper should bring: bat, glove, indoor shoes, baseball pants and catchers gear (if you are a catcher).

### **Harrison Wildcats Baseball Highlights**

- ★ League Champions: 25
- ★ District Champions: 5
- ★ USA Today Rankings: 2 (1989, 1993)
- ★ Collegiate National Rankings: 2 (1989 6<sup>th</sup>, 1998 23<sup>rd</sup>)
- ★ 89 players have gone on to play college baseball
- ★ 6 players have gone on to play professional baseball

Please return the bottom portion (with payment) to:  
Make checks payable to: Harrison Athletic Boosters-Baseball  
Any questions can be directed to Coach Sowders at 305-3929  
or email at [shawn.sowders@southwestschools.org](mailto:shawn.sowders@southwestschools.org)

Harrison High School  
C/O Shawn Sowders  
9860 West Road  
Harrison, OH 45030

### **Harrison Wildcats Baseball – Winter Camp Registration Form**

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Cell Telephone \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

Primary Position(s) \_\_\_\_\_ E-mail Address \_\_\_\_\_ Summer League/Team \_\_\_\_\_

Shirt size (please circle) Adult      YM      YL      S      M      L      XL      XXL

### **Sport Camp Assumption of Risk and Release of Liability**

I hereby authorize the director of the Harrison Wildcats Baseball Camp to act for me according to his best judgment in any emergency requiring medical attention for my son, or ward, and I hereby waive and release the camp from any and all liability for any injuries and illnesses incurred while at camp. I hereby warrant that my son, or ward, is in good physical condition and is capable of participating in the program.

Signature of Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name of Parent / Guardian: \_\_\_\_\_