

## PROSPECT CAMP APPLICATION

The Wittenberg University Baseball Prospect Camp is open to all high school baseball players wishing to play college baseball. Each player will have the opportunity to participate in a college-style workout, complete with position drills, hitting drills, live batting practice, pitching drills and bullpen work, and instruction. The Wittenberg Baseball coaching staff will conduct each session and evaluate each player on their potential to play college baseball. Campers will be evaluated on all skills and mailed a detailed, written evaluation of our assessment.

NAME\_\_\_\_\_

Street Address\_\_\_\_\_

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

Home Phone ( ) \_\_\_\_\_

Cell Phone ( ) \_\_\_\_\_

AGE\_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade\_\_\_\_\_

T-Shirt Size – Circle One (Adult): M L XL 2XL

High School\_\_\_\_\_

1<sup>st</sup> Position \_\_\_\_\_ 2<sup>nd</sup> Position \_\_\_\_\_

Bats\_\_\_\_\_ Throws \_\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_

EMAIL\_\_\_\_\_

( R E Q U I R E D F O R C O N F R I M A T I O N )

### **PROSPECT CAMP - All Skills**

**Cost - \$ 70 - Cost includes Camp T-shirt**

Saturday, January 13, 2007 1:00 – 5:00pm HPER Center

Age Group – High School Players Class Of 2007, 2008, 2009, and 2010

I hereby authorize the directors of the Wittenberg Prospect Camp to act for me accordingly to their best judgment in case of an emergency requiring medical attention. I also acknowledge that my son is covered through family medical insurance as described below.

Parent's Signature\_\_\_\_\_

Insurance Company\_\_\_\_\_

Policy Number\_\_\_\_\_

Family Doctor\_\_\_\_\_

Camper's Social Security Number\_\_\_\_\_

**Make checks payable to:**

**Wittenberg Baseball – Baseball Camp Mail to: Wittenberg Baseball – Baseball Camp P.O. Box 720 Springfield, OH 45501-0720**

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**WITTENBERG  
BASEBALL**



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