



**2019
FLYING EAGLES
Baseball Camp
July 1st to July 5th**

Girls and Boys Entering Grades 2 – 8

**Camp Director
Scott Ballard – Erskine Academy Head Baseball Coach**

**Daily Schedule: Monday, Tuesday, Wednesday, and Friday – 8:30 – 12:00
July 4th – Hitting Clinic- 9:00 – 10:00 Pitching Clinic- 10:00 – 11:00**

Daily Activities will include drill stations involving hitting, fielding, pitching, throwing, catching, bunting, and running. There will be controlled games from 11:00 to 11:45 each day. Note: Coaches at the camp will be pitching during the controlled games.

Clinic Fees: Tuition is \$95 and will include a camp tee shirt and new baseball/softball.

MAKE CHECKS PAYABLE TO: Erskine Academy NO REFUNDS AFTER JUNE 30, 2019. Mail to: Flying Eagles Baseball Camp, Attn: Coach J., Erskine Academy, 309 Windsor Road, So China, Maine 04358 .

**If you have questions:
Call Lars Jonassen(Coach J.) at 437-4322
or email at ljonassen@erskine247.com**

Application Below

“FLYING EAGLES BASEBALL DAY CAMP” -2019

APPLICATION

For Boys or Girls Entering Grades 2 through 8

Camp Dates – July 1 – July 5

FEE - \$95

Name: _____

Address: _____

City/Town: _____ **Zip:** _____

Age: _____ **SEX:** _____

School: _____ **Grade Entering:** _____

Parent(s): _____

Home Phone: _____

Work Phone: _____

Shirt Size: Youth M Youth L S M L XL

*****Please register as soon as possible in order for us to reserve one of the 50 slots for you, and to assist us in ordering the correct number of t-shirts and baseballs/softballs for the participants.**

*******IN CASE OF EMERGENCY*******

Contact: _____ **Phone:** _____

I do hereby assume responsibility for my child for the risks involved in participating in the “Flying Eagles Baseball Day Camp.” I understand that in case of injury, while participating in the camp, I will not hold Erskine Academy or any staff member or coach of the camp responsible. I also accept that my insurance company or I will pay any medical care expenses or property loss. Finally, I give my permission, in case of an emergency, to allow the staff and coaches of the “Flying Eagles Baseball Day Camp” to seek medical help for my child.

PARENT/GUARDIAN _____ **DATE:** _____

**Please Mail Application to: Flying Eagles Baseball Camp, Erskine Academy
Attn: Coach J. 309 Windsor Rd., So. China, Maine 04358**