

On Saturday January 22nd (weather/snow date Jan 29th), Vincennes University will be conducting our winter pitching, catching, and hitting camp for high school players. This showcase is for top high school players, who are serious about their future in college baseball, and want to showcase their talent in front of the VU Baseball coaching staff. Camp will be held at Beless gym located on the corner of Indianapolis and Chestnut Street. There will be two sessions; the first session is a pitching and catching camp from 10:00am-12:00pm. The second session is a Hitting Camp from 12:30pm-2:00pm.

**Pitching and Catching Camp**

**Time**: 10:00am-12:00pm

**Hitting Camp**

**Time**: 12:30-2:00pm

**Cost**: $50.00 for 1 Camp/ $80.00 for both camps

The camps will focus on Pitching, Catching, and Hitting. There will be many different aspects of the game that we will focus on during camp. Here are some of the points that we will touch on:

**Pitching**: Mechanics, Cross Symmetry, Arm Care, Different Grips, Drills, Live Bullpen with Radar Gun,

**Catching**: Stance, Receiving, Blocking, Throwing, Pop Ups, Tag and Force Plays, and Calling the Game

**Hitting**: Stance, Mechanics of Swing, Soft-Toss, Tee- Drills, Opposite Field Hitting, Pitch Recognition, and Bunting

If you have any questions, please feel free to contact:

Cole Vicars

Assistant Baseball Coach

Email: cvicars@vinu.edu

Cell: 812-870-7481

Office: 812-888-4957

Please Make Checks Payable to: Vincennes University Baseball

Please send checks to: Vincennes University

 Baseball Office PE-19

 1002 North First Street

 Vincennes IN, 47591

This camp is nonrefundable and if you are unable to attend we will credit you towards one of our upcoming camps.

**Saturday January 22nd**

Pitching and Catching $50.00 P\_\_\_\_\_\_\_ or C\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_Hitting Camp $50.00

\_\_\_\_\_\_Both Camps $80.00

First \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State \_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOB \_\_\_\_\_\_\_\_\_\_\_\_

High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Graduation Year \_\_\_\_\_\_\_\_\_\_\_

High school coach’s name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position

Bat \_\_\_\_\_\_\_\_\_\_\_\_\_Throw \_\_\_\_\_\_\_\_\_\_\_\_Height \_\_\_\_\_\_\_\_\_\_\_\_\_ Weight \_\_\_\_\_\_\_\_\_\_\_\_

If applicable, please list 2016 High School stats and Awards

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

T Shirt Size Adult - small medium large XL XXL

The undersigned (parent or guardian, if under 18 years of age) understands that the applicant will be engaging in physical activity during the camp which contains an inherent risk of physical injury and the undersigns releases and hold harmless Vincennes University, its officers, trustees, agents, employees, including all who are working the camp, from any and all liability whatever kind or nature, from personal injury or property damage arising out of the applicants participation in the camp. I know of no reason for my child not to participate in the camp. I hereby grant permission for my child to be treated by a licensed physician or member of the staff in the event of an injury, illness, or mishap and shall not hold liable any listed above for any consequences from such injuries or treatment. I have carefully read all the information in this form and agree to all conditions.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (parent or guardian)