DREW UNIVERSITY
2012 BASEBALL WINTER CLINIC

Tentative Schedule

9:45-10:00am	Arrival & Roll Call
10:00-10:20am	Warm up & Stretch
10:20-11:55am	Individual Instruction Stations - Hitting, Pitching, Infield & Outfield
11:55-12:00pm	Review & Questions

Clinic Location

The camp will take place inside the Simon Forum on the Drew University campus. For more information, including campus location and directions, please log on to www.drewrangers.com.

Equipment Needed

The camp will provide helmets, baseballs. Campers should bring a glove, hat, bat and sneakers (no cleats)

Clinic Staff

Brian Hirschberg - Drew University Head Coach
2012 Landmark Conference Coach of the Year

Alex Perez - Drew University Pitching Coach
Former pitcher in the New York Yankees Organization

Lou Colon - Drew University Assistant Coach
Former player in the Baltimore Orioles Organization

Tom Murray - Drew University Assistant Coach
Former Drew University Player and Captain

Along with several current Drew University players

Additional Clinic Information

Ages: 6-18 (players will be placed in age groups)

Date: Sunday, December 2, 2012 (Rain or Shine)

Cost: $50/player

PLEASE COMPLETE THE FOLLOWING AND SEND WITH PAYMENT

Player's Name: _____ Position: _____ Age: _____

Home Address: _____

Emergency Contact Number: _____ Email: _____

Release and Medical Treatment Authorization:

In consideration of and through my involvement in the Drew University Baseball Clinics, I (or behalf on my minor child) knowingly and freely assume all such risks; and release, hold harmless and promise not to sue the officials, agents, and/or the employees. I certify that (or on behalf on my minor child) in the event of injury or illness during my participation at the Drew University Clinic that all costs are my responsibility. In addition, I do hereby grant permission for duly authorized medical treatment by certified professionals to be administered to my child in the event of injury or illness during my participation at Drew University.

Participant's Name: _____

Participant's Signature: _____ Date Signed: _____

Parent/Guardian Signature if under 18: _____

Insurance Company: _____

Policy Number: _____

Please Mail Applications and Make Payment to:

Drew Baseball
36 Madison Avenue
Madison, NJ 07940

Please call the Drew Baseball office at 973-408-3902 or email Brian Hirschberg at bhirschberg@drew.edu for any questions you may have