



2011 Knights Baseball Camp

at

St. Andrews

November 5, 2011



Ages: 8th grade and up

Cost: \$50 per player

\$60 day of, if spots are still available

Registration at 9 a.m.

Camp begins 9:30 a.m.

Camp ends 4 p.m.

Knights baseball camp is beneficial for those who wish to continue their career beyond high school. This camp will not only provide instruction but the opportunity for players to put their skills to work. The coaching staff at St. Andrews will be instructing participants in hitting, pitching and defense. Also included in the day will be information on strength and conditioning, nutrition and academics. Lunch will also be provided to each player. Each player needs to bring a pair of tennis shoes as well as their baseball gear.

Early Registration: \$50 deposit due with application no later than *November 4, 2011*.

Day of Registration: \$60 if spots are still available.

Mail check made payable to: Matt Boykin, Baseball Office, 1700 Dogwood Mile, Laurinburg, N.C. 28352

Head Coach: Matt Boykin, Office: 910.277.2079, Email: boykinmr@sapc.edu

Application for the 2011 Knights Baseball Camp at St. Andrews

Name of Camper: _____ Age: _____ Grade: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Position: _____

School: _____ Drug Sensitivities: _____

Current Medications: _____ Allergies: _____

Past Injuries: _____

Parent's Name: _____ Home Phone: _____

Email Address: _____ Cell Phone: _____

Waiver Statements:

All participants in 2011 Knights Baseball Camp must have their own medical coverage. The camp provides additional coverage only after the camper's insurance policy has been utilized. Campers will not be allowed to participate in camp activities unless the following information is submitted and the form signed by the parents and/or guardian of the camper.

Campers Insurance Company _____ pol. # _____

Company address and phone _____

I/We the undersigned, hereby certify that I am/ we are the parent(s) or legal guardian(s) of the camper. I hereby grant permission to 2011 Knights Baseball Camp staffers to seek and allow appropriate medical attention to be administered to my son or daughter in the event of accident, injury, or illness. I am responsible for all expenses pertaining to medical attention and treatment, except for expenses covered by 2011 Knights Baseball Camp additional medical coverage policy.

Signed _____ Date _____