



Seventh Annual SUMMER BASEBALL CLINIC

for boys/girls ages 5 – 12

*5-8yr olds- Drills/games and instruction
will focus on fundamentals.*

*9-12 yr olds- Drills/games and instruction
will focus on advanced skills and beginning a
transition to a bigger field.*

Session 1: July 14th –July 18th

Session 2: July 21st – July 25th

9AM to Noon

Highlights:

Fundamentals: hitting, throwing, catching, fielding, base running and pitching taught by FWHS baseball coaches & varsity players

Enrollment Information

Cost: \$195 for an individual session and \$350 for both sessions.

- Each player will receive a camp-shirt

***Registration limited – first come, first served**

Make checks payable to: *Mark Caron-(Head Baseball Coach)*

Send checks & completed application to:

Mark Caron, 74 New Lebbon Rd. Sandy Hook, CT 06482

** Profits will be donated to the FWHS baseball program.

Equipment Needed: Glove, sneakers or cleats, long pants.

(bats and catcher's gear are optional)

Medical Care: CPR and First Aid certified staff present at all

times.**Location:** Tunxis Hill Park baseball field , Melville Ave.

Other: In cases of inclement weather an afternoon of different day will be used as make up time.

If you have any questions please E-mail or call the following contact:

Mark Caron – mcaron10@sbcglobal.net phone # 203-209-5735





SUMMER BASEBALL CLINIC APPLICATION

Updates will be provided using the e-mail address provided so
please print clearly.

Name _____

Age _____ Grade completing _____ Session(s) attending _____

Home Address _____

Phone _____ E-mail _____

Emergency Contact Name & Phone _____

Medical Issues/ Allergies

Parent or guardian must sign: As parent or legal guardian of above applicant, I authorize the Mark Caron's Summer Baseball Camp to request medical treatment as necessary to insure the well-being of the applicant. We, the undersigned, for ourselves, or heirs, executors and administrators, waiver and release and forever discharge Mark Caron's Summer Baseball Clinic, their staff, officers, agents, representatives, employees, successors and assigns of and from any and all rights claims for damages to person or property which may be sustained or occur during participation in activities, to or from program, whether paid damages, injury or loss are due to negligence or not.

Parent/Guardian Signature

Make checks payable to: Mark Caron

Payment is non-refundable.

Send application with payment to:

Mark Caron-74 New Lebbon Rd. Sandy Hook, Ct. 06482

