



Demon Baseball Camps

Grades 1 - 8



Burlington High School Varsity Baseball coach Scott Staude will have his coaching staff on hand to give each young participant personal attention.

To visit the Burlington Demon Baseball Website...go to...

www.leaguelineup.com/burlingtondemons

HITTING CAMP - March 14th

Great way to improve batting skills both mentally & physically. Each player will be video taped and analyzed to help correct flaws in hitting stance and swing. Batters can be sure they will take many swings during this camp. Batting tees, soft toss and pitching machines will be utilized to give all players plenty of opportunities. Bats and batting helmets will be provided. Bring your own bat, if you wish. Batting gloves are recommended but not required.

Course #: 4065-WHC1 (Grades 1 - 4)
Date: Saturday, March 14, 2009
Times: 10:00 AM - 12:30 PM
Fee: \$25.00
Location: Burlington High School Gym

Course #: 4065-WHC2 (Grades 5 - 8)
Date: Saturday, March 14, 2009
Times: 1:00 PM - 3:30 PM
Fee: \$25.00
Location: Burlington High School Gym

DEFENSIVE CAMP - March 21st

Members of the BHS baseball coaching staff will be on hand to teach proper mechanics for pitching, catching, outfield and infield. Appropriate stretching and throwing techniques will be taught to strengthen young arms. Players will get to work one-on-one with a coach and learn the importance of sound fundamentals. Bring your baseball gloves and tennis shoes.

Course #: 4065-WDC1 (Grades 1 - 4)
Date: Saturday, March 21, 2009
Times: 10:00 AM - 12:30 PM
Fee: \$25.00
Location: Burlington High School Gym

Course #: 4065-WDC2 (Grades 5 - 8)
Date: Saturday, March 21, 2009
Times: 1:00 PM - 3:30 PM
Fee: \$25.00
Location: Burlington High School Gym

2009 Baseball Camp Registration and Waiver Form
Registration Deadline: Wednesday, March 4, 2009

***** A free drawing backpack will be given to every camper *****

Name: _____ Grade: _____ Position(s): _____ School: _____
 Address: _____ City/State/Zip: _____
 Parent/Guardian: _____ Phone: (H) _____ (W) _____
 Emergencies, notify: _____ Phone: (H) _____ (W) _____

Please enroll me in the following programs: (Make check payable to Community Education Dept.)

Course #	Program Name	Dates/Days	Time	Fee \$25.00 each
Total				

I, as a parent/guardian of the above named child, assume all risks and hazards incidental to my child's participation in these Community Education programs and camps, including transportation to and from these activities. I hereby waive, release, absolve, indemnify and agree to hold harmless the Community Education Department, Burlington Area School District, their officials, supervisors, coaches, and participants to any claims and damages as a result of my child's participation. I understand that this waiver is valid anytime my child participates in and Community Education Department sponsored program, activity, or event until he/she reaches the age of 18.

Parent/Guardian Signature: _____ Date: _____

Return registration form below with payment to Community Ed Dept., 400 McCanna Parkway, Burlington, WI 53105