



**DELAWARE VALLEY REGIONAL HIGH SCHOOL**  
**2017 Summer Baseball Camp**  
**June 26 – June 30, 8:30 AM-Noon**  
**Grades 3-9**

Camper's Name \_\_\_\_\_ Grade Entering \_\_\_\_\_  
 Address \_\_\_\_\_ Email \_\_\_\_\_  
 Telephone \_\_\_\_\_ School \_\_\_\_\_  
 Emergency Contact/Phone # \_\_\_\_\_  
 Allergies/Health Concerns \_\_\_\_\_  
 T-shirt Size (circle one)    YM    YL    AS    AM    AL    AXL

**PERMISSION TO PARTICIPATE**

IT IS ASSUMED THAT THE APPLICANT IS A NORMAL, HEALTHY STUDENT AND CAN PARTICIPATE IN ALL REGULAR BASEBALL RELATED ACTIVITIES UNLESS STATED IN WRITING PRIOR TO THE CLINIC TO THE DIRECTOR UPON EVENT.

REALIZING THAT SUCH ACTIVITY INVOLVES THE POTENTIAL FOR INJURY WHICH IS INHERENT IN ALL SPORTS, I ACKNOWLEDGE THAT EVEN WITH THE BEST COACHING, USE OF PROTECTIVE EQUIPMENT AND STRICT OBSERVANCE OF RULES, INJURIES ARE STILL A POSSIBILITY. ON RARE OCCASIONS THESE INJURIES CAN BE SO SEVERE AS TO RESULT IN TOTAL DISABILITY, PARALYSIS OR EVEN DEATH. I ACKNOWLEDGE THAT I ASSUME ALL RESPONSIBILITY AND EXPENSE THROUGH MY OWN INSURANCE COMPANY.

I GIVE PERMISSION FOR EMERGENCY TREATMENT FOR INJURIES SUSTAINED IN ANY ATHLETIC EVENT, AT THE PLACE OF INJURY, AT THE DISCRETION OF THE ATTENDING PHYSICIAN OR ATHLETIC TRAINER WORKING UNDER SUPERVISION.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Please make check or money order payable to: **Del Val Baseball**

**Weekly Camp Rate: \$140**

**Early Bird Weekly Rate, \$15 off, payment must be received by June 1<sup>st</sup>: \$125 Total**

**Sibling Discount-\$20 off weekly rate for additional child**

**Daily Rate: \$35**

Mail to: **Marty White**  
**19 Senator Stout Road**  
**Frenchtown, NJ 08825**

Any questions? Call Marty White at 1-610-217-6943 or e-mail [martywhite@dvrhs.k12.nj.us](mailto:martywhite@dvrhs.k12.nj.us)

Tear off and retain this important information:

**Delaware Valley Regional High School**  
**2017 Summer Baseball Camp**  
**June 26 – June 30, from 8:30-Noon for Grades 3-9**  
**Delaware Valley High School Gym and Baseball Fields**

1. Wear appropriate baseball clothing
2. Bring your own equipment (glove, bat, catcher's gear, helmets) that you have.
3. Bring a water bottle and snack for the day.
4. Camp will be held rain or shine.

If you have any questions or need more registration forms, please contact Marty White by email [martywhite@dvrhs.k12.nj.us](mailto:martywhite@dvrhs.k12.nj.us) or call him at 1-610-217-6943.