2024

BEACON BULLDOGS

23nd ANNUAL

BASEBALL CAMP
**August 19, 2024-August 22, 2024**

**PURPOSE**

This year’s camp will focus on developing the following skills:

*Hitting, Fielding, Throwing, Base Running, Pitching and Catching*

**ELIGIBILITY**

Boys and girls ages 6–12 are grouped into separate teams according to ability, age, size, and previous baseball experience.

**DATES/TIME/COST**

Aug 19-Aug 22 9:00 am – 1:00 pm

Rain date: Friday August 27, 2021

$100 per camper, **payment is due on or before Aug 12, 2024**.

**CAMP FEATURES**

**Camp Director:** Bobby Atwell ‘82, Beacon High School Varsity Baseball Coach.

**Assistant Director:** Ryan Koval, Beacon High School Assistant Coach

Instructional assistance from top high school players.

FREE CAMP T-SHIRT GAMES AND AWARDS

**REGISTRATION**

To register, please complete the registration form below and the enclosed indemnification form, and return with a check made payable to:

**Beacon High School Activity fund (Baseball in memo)**

c/o Bobby Atwell

101 Matteawan Road

Beacon, NY 12508

(845)-389-2356

**Bulldogs 2024 Baseball Camp Registration Form**

Campers Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_ T-shirt Size: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State: \_\_\_\_\_\_\_ Zip: \_\_\_\_\_

E-mail address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INDEMNIFICATION AND HOLD HARMLESS AGREEMENT**

I hereby release the Beacon Recreation, Beacon City School District and Beacon High School baseball team and its members and coaches of any liability in connection with any damages and/or injuries I or the person named above may sustain as a result of participation in the 2024

 Bulldog summer camp.

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated: Beacon, NY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have any questions feel free to call Bobby Atwell at Cell (845) 389-2356

**\*All proceeds from the Beacon Bulldog camps go directly to Beacon Bulldog Baseball\***