BHM Buckeyes
Spring Training Baseball Camp

Baseball Heritage Museum Buckeyes Baseball Organization is offering a Spring Training Baseball Camp for players’ ages 8-13 throughout the month of March. The camp will provide skill instruction in the areas of Hitting, Throwing, Pitching and Fielding as well as providing Batting Practice and a Controlled Scrimmage.

Great way to prepare for the upcoming season!

CAMP DETAILS
Where: Andrews Osborne Academy, 38588 Mentor Avenue, Willoughby, OH 44094
Time: 9:00am – 11:00am/ Check-in 8:30am.
Ages: 8-13
Dates: Sunday, March 1, 8, 15, 22
Cost: $80. Individual Camp days $25. (Team Rates available- minimum of 6 players)
Description: Each participant will be provided; Individual hitting, pitching, and fielding and baserunning instruction along with batting practice and a controlled game. Instructors for the program are BHM Buckeyes Coaches. The camp will utilize the Batting Cages, Bullpen Area and Turf Field.

How to Register: Registration Form along with waiver and payment can be mailed to the address listed below. A confirmation notice will be sent out prior to the start date of the camp.
You can also register by email.

Mail registration form and payment to: BHM Buckeyes Spring Training Baseball Camp
Attn: Jay Murphy
PO Box 201403
3675 Warrensville Center road
Shaker Heights, OH 44120

Checks made payable to: Baseball Heritage Museum (BHM)

REGISTRATION FORM

Participant’s name_________________________________________ Age: ________
Address_____________________________________________________
Parent/Guardian Names__________________________________________
Phone (Home, Work, Cell)_______________________________________
E-mail________________________________________________________
List any allergies or medical conditions____________________________

* Player Waiver of Liability must be signed prior to allowing any participating in the camp.

Questions: Please contact: Jay Murphy- BHM Director of Baseball Activities-Cell: 216.978.8168
Email Address: jay@baseballheritagemuseum.org
I hereby allow my child to participate upon my initiative and application and assume all risks of his/her participation in the Baseball Heritage Museum Buckeyes Spring Training Baseball Camp at Andrews Osborne Academy and in consideration of his/her participation in said program due hereby waive and release all claims arising as a result of personal injuries or property loss during such program. If a parent or guardian is not present, I furthermore authorize the staff program in the event of illness or injury to administer emergency care and to arrange for any medical transportation to the nearest health care facility deemed appropriate. I understand every effort will be made to contact the parent or guardian prior to any involved treatment. I grant permission to a qualified physician and/or other medical personnel to furnish medical care using the above guidelines and while my child is participating in the Baseball Heritage Museum Buckeyes Spring Training Baseball Camp. I also agree that my insurance carrier or I will bear the financial responsibility for any medical treatment administered under the above guidelines.

Parents Name (Please Print) __________________________________________________

Parents Signature __________________________________ Date ___________________

Participants Name (Please Print) _____________________________________________

Participants Signature __________________________________ Date ___________________