

## RELEASE FORM

*I hereby give permission for my child to participate in the \_\_\_\_\_ Camp. I hereby waive and release all coaches from any and all liability for injury and / or illness incurred while in camp. In case of an emergency situation, and parents cannot be reached, I give the camp staff authorization to handle medical clearance.*

\_\_\_\_\_  
**Parent Signature**

## CHECKLIST OF THINGS TO BRING

- HAT
- BASEBALL SHOES
- GLOVE
- SHORTS FOR PRACTICE
- BASEBALL PANTS FOR SLIDING
- SHIRTS FOR PRACTICE
- BAT
- ATHLETIC SOCKS AND SUPPORTERS



**RICK LYNCH BASEBALL CAMP**

CONTACT  
**RICK LYNCH**

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# 2010

**TOMBALL COUGAR  
BASEBALL CAMP**



**Session 1: June 7-9**

Incoming 7th, 8th & 9th Graders

**Session 2: June 14-16**

Grades K-6

**TIME: 8:30 A.M.—11:30A.M.**

**FIRST MORNING  
CHECK IN @ 8:15 A.M.**

**Camp will be held at the  
TSA Little League Fields**

**TOMBALL BASEBALL CAMP**

# CAMP DIRECTOR



## RICK LYNCH

*Head Baseball Coach*

*Tomball High School*

- ◆ State Playoffs: 2010, 2009, 2008, 2006, 2005, 2004, 2003, 2002, 2001, 2000, 1999, 1998, 1997, 1994, 1993, 1992, 1991, 1990, 1988, 1986, 1983
- ◆ 1994 5-A State Championship
- ◆ Regional Finals: 1993, 1992, 1988
- ◆ Pittsburgh Pirates (Scouting Supervisor)
- ◆ Try-out Camp Coordinator

**O**ur Camp Goal is to give each athlete the best possible baseball experience. To teach the best, most updated fundamentals in the game today

## CAMP FEATURES

### ◆ VIDEO ANALYSIS

Each camper will be individually videotaped while hitting. In a special session, off the field, he will be able to “see himself on T.V.”

### ◆ VELOCITY ANALYSIS

Each camper will throw on the radar gun for speed and accuracy.

### ◆ OVERALL EVALUATION

Each camper will receive an overall camp evaluation of his skills.

### ◆ ABILITY GROUPING

In order to maximize benefit to each individual camper, groups will be formed based on ability level.

## CAMP EMPHASIS

- ◆ HITTING
- ◆ PITCHING
- ◆ TEAM PLAY
- ◆ INDIVIDUAL AND TEAM DEFENSE
- ◆ BUNTING
- ◆ INFELD/OUTFIELD FUNDAMENTALS

## TOMBALL COUGAR BASEBALL CAMP

Name (Print): \_\_\_\_\_ Session 1 \_\_\_\_\_ Session 2 \_\_\_\_\_

Grade Entering '09-10: \_\_\_\_\_ School: \_\_\_\_\_

Age: \_\_\_\_\_ Birth date: \_\_\_\_\_ Parent Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

T-shirt size (Circle One): Small Medium Large Extra Large

Camp Cost is **\$90.00**. Please indicate method of payment: Cash Check (Check# \_\_\_\_\_)

Make Checks Payable to Rick Lynch. Mail to: Tomball Cougar Baseball Camp, 30802 Martens Rd. Tomball