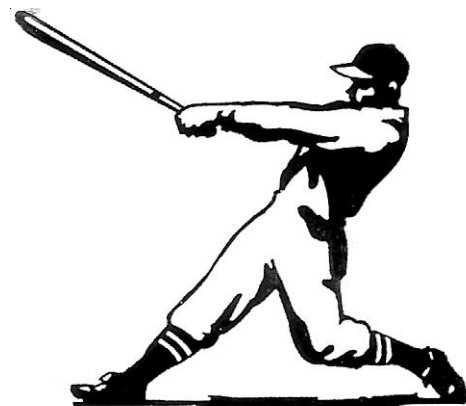


**EMPORIA STATE UNIVERSITY  
HORNET HITTING CAMP**



**Date:** January 7                      Ages: 14-18  
January 14                      Ages: 14-18  
January 21                      Ages: 14-18  
January 28                      Ages: 14-18

**Place:** Trusler Complex

**Times:** 9:00 a.m. – 12:30 p.m.

**Price:** \$50.00 – Checks made payable to: *Emporia State Baseball*

**Activities:** Camp will cover the fundamentals of hitting and bunting with individual instruction.

**Facilities:** New Hornet Hitting Shed, with batting cages and area for drills. Video will be taken and gone over with each player.

**Registration:** To register, send in the attached registration form with your \$50.00 check to:  
**Emporia State University**  
**C/O Hornet Baseball Camp**  
**1200 Commercial St.**  
**Emporia, KS 66801**

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**REGISTRATION FORM**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

E-Mail \_\_\_\_\_ Year in School \_\_\_\_\_ Age \_\_\_\_\_

**PLEASE CIRCLE THE DATE WHICH YOU WILL BE ATTENDING:**

*January 7<sup>th</sup>*

*January 14<sup>th</sup>*

*January 21<sup>rd</sup>*

*January 28<sup>th</sup>*

**Parental Release and Indemnity Agreement**

Upon acceptance of this application, my minor child (\_\_\_\_\_) will be eligible for participation in the Emporia State Baseball Camp. I agree to release Emporia State University, its Board of Governors, officers and employees and Coach Bob Fornelli and staff, from all claims on account of injuries or losses which may be sustained by my minor child while attending camp. I agree to INDEMNIFY the ESU Board of Governors, and ESU officers and employees from any claim which may be presented by my minor child in the future resulting from attending camp.

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

**Emergency Contact** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**EMPORIA STATE UNIVERSITY  
HORNET PITCHING CAMP**



- Date:** January 14                      Ages: 14-18  
January 21                              Ages: 14-18  
January 28                              Ages: 14-18
- Place:** Trusler Complex (New Hornet Hitting Shed)
- Times:** 1:00 p.m. – 4:00 p.m.
- Price:** \$50.00 – Checks made payable to: *Emporia State Baseball*
- Activities:** Camp will cover the fundamentals of pitching with individual instruction.
- Facilities:** New Hornet Hitting Shed, with indoor mounds and area for drills. Video will be taken and gone over with each player.
- Registration:** To register, send in the attached registration form with your \$50.00 check to:  
**Emporia State University  
C/O Hornet Baseball Camp  
1200 Commercial St.  
Emporia, KS 66801**

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**REGISTRATION FORM**

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
E-Mail \_\_\_\_\_ Year in School \_\_\_\_\_ Age \_\_\_\_\_

**PLEASE CIRCLE THE DATE IN WHICH YOU WILL BE ATTENDING:**

*January 14<sup>th</sup>*

*January 21<sup>th</sup>*

*January 28<sup>th</sup>*

**Parental Release and Indemnity Agreement**

Upon acceptance of this application, my minor child (\_\_\_\_\_) will be eligible for participation in the Emporia State Baseball Camp. I agree to release Emporia State University, its Board of Governors, officers and employees and Coach Bob Fornelli and staff, from all claims on account of injuries or losses which may be sustained by my minor child while attending camp. I agree to INDEMNIFY the ESU Board of Governors, and ESU officers and employees from any claim which may be presented by my minor child in the future resulting from attending camp.

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

**Emergency Contact** \_\_\_\_\_ **Phone Number** \_\_\_\_\_