



June 10-12 2019 M-W

Session 1: Grades 1-6

9:00 am-11:00am

Day 1 Registration at 8:30am

Session 2: Grades 7-9

12:00 pm-2:00pm

Day 1 Registration at 11:30am

Cost of Camp

\$65 Per Camper by May 25th

\$70 Per Camper after May 25th

Make checks payable to:

Bronco Foundation-Baseball

Mail player application to :

**Clovis North Summer Baseball
Camp C/O Jeff Prieto**

1533 Enlightened Way

Clovis, CA 93619

CLOVIS NORTH SUMMER BASEBALL CAMP

To be held at

Clovis North High School

Bronco Stadium

Players & Coaches

Jeff Prieto Clovis North Head Coach

Brian Oliver Clovis North Hitters

Zack Colby Clovis North Infielders

Brandon Simon Clovis North Outfielders

Koby Cummings Clovis North, JV Head

Paul Babcock Clovis North, FR Head

Nick Nurcanyon Clovis North JV Asst

In accordance with CIF bylaw 207, any athlete who transfers from School "A" to School "B" after having prior contact, during the previous 24 months, either directly or indirectly with school "B" prior to enrollment shall not be eligible at School "B" for 365 days from initial date of enrollment. This includes this camp, clinic, AAU, club team, and/or workouts.

Player Application

Players Name: _____

Grade: _____ Age: _____

Address: _____

City: _____ Zip: _____

Phone: _____

Session 1 _____ OR Session 2 _____

Shirt Size: Youth S M L XL

Men's S M L XL XXL

Medical Consent Form

Parents Name: _____

Home PH #: _____

In Case of Emergency Contact:

Phone: _____

Name of Family Doctor:

Phone: _____

We/I hereby give lawful authorization to any persons affiliated with the Clovis North Summer Baseball Camp authorization or consent which my child cannot legally give by reason of their physical condition, legal age or other cause, and by which may be required to obtain medical aid, attention, care, treatment and or hospitalization for said child I the event of a medical emergency.

I understand that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority to said agent in case of medical emergency.

This authorization is given pursuant to the provisions contained in Section 25.8 of the Civil Code of California.

Signature: _____

Date: _____

Please return by May 25, 2019

Please label all equipment. Batting Gloves are recommended. The Clovis North Summer Baseball Camp is not responsible for lost equipment.

