



# Power Pitching & Hitting, Inc.

## SOTFBALL CAMPS 2010

**FULL DAY CAMP 9am to 3pm**

**HALF DAY CAMP 9AM to 12pm**



Camps Include:



WINDMILL and SLINGSHOT • Hitting • Fielding • Catching •  
BAT SPEED • BASERUNNING • SLAP HITTING

Awards, and Contests

Power Pitching & Hitting, Inc. has teamed up with Milltown Little League to offer a Summer Camp experience like no other. Since 2002 we have been providing players of all ages with Summer Camps, Clinics and Private lessons and now we get to bring our experience to you! This has us excited! We have worked with over 2,000 players in the last 8 seasons and we are looking forward to putting on an exceptional camp special

**For Milltown Players of all ability levels! Ages of the camp are 6 to 12!**

What makes our camps different? Many things but lets start with out position specific options. Every camper receives basic instruction in Hitting, Throwing, Bunting, Base running, and Fielding. **BUT OUR CAMPERS CAN SIGN UP BY POSITION AND GET ADVANCED INSTRUCTION IN A POSITION(S) OF THEIR CHOICE EVERYDAY.**

Every camper will compete to win various awards and contests. This year the winners of our contests and awards will receive awards to commend them on their efforts. All camps are staffed with our professional and fun staff. Please be sure to check out [www.pphbaseball.com](http://www.pphbaseball.com) to view our baseball programs!

**CAMP IS FROM 9am – 3pm**

**Costs: Only \$175 per camper Half Day \$125**

**CAMP IS Monday through Thursday (Friday is Rain Date)**

### Camp Dates and Locations

**JULY 26<sup>th</sup> through JULY 29<sup>th</sup>  
At Burrough Park, Milltown**

**REGISTER BY MAIL OR ONLINE AT  
[www.PPHBASEBALL.com](http://www.PPHBASEBALL.com)**

CAMP HAS ADVANCED FEATURES  
AS WELL AS BASIC FEATURES!  
AFTER 3 SEASON RUNNING  
BASEBALL CAMPS IN TOWN WE  
NOW OFFER YOU SOFTBALL!

### What you will get

- Quality Softball instruction
- Opportunity to learn how to step up their game with drills the pros use
- Advanced and Basic Instruction
- The most comprehensive instructional camp in the area with the most locations traveled to.
- A chance to win awards for sportsmanship and contest based on performance.
- Train with the original travel baseball/Softball academy in the area

**Camp Format Information**

(Schedule is tentative)

**Monday**

9:00 Attendance and agenda  
9:15 Stretch  
9:30 Proper Throwing Drills and Mechanics  
10:00 Batting (mechanics demonstration)  
10:30 Batting Practice  
11:30 Group Breakdown (P,C,IF,OF)  
12:30 Lunch  
1:00 Bunting  
1:30 Team Baseball Games  
3:00 Dismissal

**Tuesday**

9:00 Attendance and agenda  
9:15 Stretch  
9:30 Proper Throwing Drills and Mechanics  
10:00 Baserunning  
11:00 Group Breakdown (P,C,IF,OF)  
12:30 Lunch  
1:00 PREGAME BATTING PRACTICE  
1:30 Team Baseball Games  
3:00 Dismissal

*Log on to our site for  
our other programs:  
[www.pphbaseball.com](http://www.pphbaseball.com)*

**Wednesday**

9:00 Attendance, Agenda, Stretch, Warm Up  
10:00 All players basic fielding  
11:00 Group Breakdown (P,C,IF,OF)  
12:00 Lunch  
12:30 Batting Practice  
1:30 **HOME RUN DERBY**  
3:00 Dismissal

**Thursday**

9:00 Attendance, Agenda, Stretch, Warm Up  
10:00 **FIELDING CONTEST**  
11:00 **ACCURACY THROWING CONTEST**  
12:30 Lunch  
1:00 **BASERUNNING CONTEST**  
1:30 **TEAM GAMES**  
2:30 **AWARDS**  
3:00 Dismissal

**Friday**

**RAIN DATE IF NEEDED**

*Please send check or money order, payable to **POWER PITCHING & HITTING** for \$175 per child, with completed enrollment form, to us at: **PO Box 241, Plainsboro, NJ 08536** or register online at [www.pphbaseball.com](http://www.pphbaseball.com)*

Player's First Name	_____	Last Name	_____
Street Address	_____	City, State, Zip	_____
Player's Age	_____	Phone	(    ) _____
Mother's Name	_____	Father's Name	_____
Emergency Contact	_____	Relationship	_____
Emergency Phone	_____	Email Address	_____

Does the player have any medical condition that would preclude/restrict participation in the clinic?  
 YES     NO    If YES, please explain.

Primary Position: (Please Circle One)    P    C    IF    OF  
What position do you want to learn most about during the camp?

Please Specify which week you are attending. (Circle one)  
**July 26 through 29 - West Windsor Community Park**  
**FULL DAY or HALF DAY (circle one)**

*Waiver: I the undersigned, as a parent or guardian of the named applicant for entry into the clinic activities offered at SBAA's Facilities & Adjacent Fields do hereby give permission and approval for the applicant's participation in Instructional Classes offered by Power Pitching & Hitting Professional Baseball Instruction, Inc. I further agree to assume all risks and hazards incidental to such participation, and I do hereby waive, release and absolve the organizers, sponsors, directors, managers, coaches, instructors, and participants from any claim arising out of injury to the applicant, my son/ daughter/ ward.*

*Medical: I give my consent for any emergency medical/ surgical treatment to be given to my child. This treatment pertains to life threatening situations or any other medical emergencies such as fracture or suturing. I give my consent for the emergency to treat my child. This does not apply to elective surgery.*

Signature of Parent \_\_\_\_\_

Date \_\_\_\_\_