



Power Pitching & Power Hitting FALL PROGRAMS at our NEW FACILITY!

**COME SEE WHAT ALL THE HYPE IS ABOUT!
THE ONLY BAT SPEED PROGRAM in NJ!**

THE BAT SPEED PROGRAM:

- Drills for increasing Power
 - Swinging different weighted bats for Strength
 - Swinging underload bats for Bat Speed
 - Series of training stations for Increased Power
- Measurements of Bat Speed and Exit Velocity

PPH POWER CONDITIONING

PROGRAM: Ages 9 and up

- Overall Fitness and Conditioning For Baseball Softball (Speed, Agility, Power)
- 10 Years Experience Training Athletes Specifically For Baseball and Softball
- Medicine Ball, Kettle Bells, Arm Bands, and MORE!
- Get in shape for the upcoming Season with us
 - Good For All Ages 9 through 18

CAMP LOCATION:

Power Pitching & Hitting
Academy
411 Joyce Kilmer Ave Suite 4

(732) 586-1309 www.pphbaseball.com

Camp Sessions

8 WEEK SESSION – Starting January 10th and 11th
Ending March 1st

Saturdays and Sunday Sessions
(Sessions are 1 hour long)

TIMES (both Saturday and Sunday):

9AM VELOCITY 10AM BAT SPEED

CLASS SIZE LIMITED

COST \$200

Both Sessions - \$350

Please send check or money order, payable to POWER PITCHING & HITTING for amount of camp/ camps selected, with completed enrollment form, to us at: (PO Box 241, Plainsboro, NJ 08536) or 411 Joyce Kilmer Ave, New Brunswick, NJ Suite 4

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.

Please Specify which session you are attending. (Circle one)

BAT SPEED (sat) Bat Speed (Sunday) Conditioning (Sat) Conditioning (Sunday) BOTH

Waiver: I the undersigned, as a parent or guardian of the named applicant for entry into the clinic activities offered at WWLL/WW Community Park 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

