

# SPRING WOODS TIGERS BASEBALL CAMP @ SPRING WOODS HIGH SCHOOL

**When:** Tuesday May 28<sup>th</sup> and Wednesday May 29<sup>th</sup>

**Who:** Boys entering fourth through ninth grades in Fall '19

**Location:** **SPRING WOODS HIGH SCHOOL BASEBALL FIELD**

**Times:** 9:00am – 12:00pm

**Instructors:** SWHS Coaching Staff & former SWHS players

**Cost:** Free  
Includes t-shirt & instruction

**Instruction in:** Proper fundamentals of hitting, fielding, & throwing  
Proper base-running, bunting, & situational baseball

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## CAMPER APPLICATION

**\*\*PLEASE ATTACH A COPY OF A RECENT PHYSICAL**

Name \_\_\_\_\_  
Last First

Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_  
month day year

T-shirt size: S M L XL  
(please circle one)

Address \_\_\_\_\_ Zip \_\_\_\_\_

School camper will attend in Fall '19: \_\_\_\_\_

Camper's grade level in Fall '19: 4 5 6 7 8 9 (circle one)

Parent/Guardian Name \_\_\_\_\_

Home phone # (\_\_\_\_) \_\_\_\_\_

Work phone # (\_\_\_\_) \_\_\_\_\_

In case of emergency, please notify (other than above):

1. \_\_\_\_\_

phone # \_\_\_\_\_

2. \_\_\_\_\_

phone # \_\_\_\_\_

**Camp provides:** Any necessary equipment, accident insurance, & a SWHS camp T-shirt

**You need to bring:** Cap, glove, bat (if you have one), cleats & tennis shoes, water, towel, sun protection

**Registration**                    **MAY 24TH, 2019**

**Deadline:**                      Late registration will be accepted only as space is available.

Please mail registration forms:

Spring Woods H.S.  
c/o Brian Keefe  
2045 Gessner  
Houston, TX 77080



Any questions, feel free to call (713) 251-3100 & ask for Coach Keefe, Coach Pearce,  
You can also email the coaches at:

Coach Keefe:                    [brian.keefe@springbranchisd.com](mailto:brian.keefe@springbranchisd.com)  
Coach Pearce:                   [william.pearce@springbranchisd.com](mailto:william.pearce@springbranchisd.com)  
Coach Mercado                 [miguel.mercado@springbranchisd.com](mailto:miguel.mercado@springbranchisd.com)

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I hereby authorize the directors of the Spring Woods H.S. Boy's Baseball Camp to act for me in accordance with their judgment in any emergency requiring medical attention. I further waive & release Spring Woods H.S. Boy's Baseball Camp from liability for any damages from injuries and/or illness sustained at the Spring Woods H.S. Boy's Baseball Camp. I know of no mental or physical conditions that might affect my child's ability to safely participate in the camp. I have included a copy of my child's latest physical & have notified the camp instructors of any physical ailments my child has experienced of which they should be aware.

Parent/Guardian Signature: \_\_\_\_\_

