

2025 Lake View Chief Baseball Camp

Tuesday May 27 through Thursday May 29, 2025 (Thursday May 29th Pitchers & Catchers Session)

The Lake View Chief Baseball Camp is designed to teach the fundamentals of the game of baseball.

Fundamentals are essential for a young baseball player. They provide the basis for improvement, which aids in the overall enjoyment of the game.

Coach Cortez and his staff are excited about the opportunity to teach the skills to every young baseball player attending this year's camp.

Day 1-2-3 - Session One

Grades: Incoming 4th thru 6th

Date: Tue. May 27 - Thur. May 29

Time: 8:30am – 9:45am

Day 1-2-3 - Session Two

Grades: Incoming 7th thru 9th

Date: Tue. May 27 - Thur. May 29

Time: 10:00am – 11:30am

Day 3 - Pitcher & Catcher Session

Grades: Incoming 4th thru 9th

Date: Thursday May 29

Time: 11:45am – 1:00pm

Site: Lake View Baseball Field

(Behind Lake View High School: 900 East 43rd Street, San Angelo, TX 76903)

**What to Bring: Baseball Glove, Baseball Shoes, and Bat (If Possible) – Name Printed on Equipment
Water will be provided in a water cooler.**

In case of inclement weather, the camp may be moved indoors. Please go to Lake View Chief's Baseball Field first and directions will be given at that time.

Walkups will be accepted on the day of camp

Cost for Camp: \$45.00 / \$60.00, which includes T-Shirt

(\$45.00 Day 1/Day 2/Day3)

(\$60.00 Day 1/Day 2/Day 3 - PLUS Pitchers & Catchers Camp)

For Information Call:

Coach Tony Cortez @ (254) 485-0109

Coach Mark Arnold @ (830) 822-4536

Online Registration



Cut Lower Portion

Name: _____ Age: _____ Grade(Next school year): _____

Address and Zip _____ Phone: (____) _____

T-Shirt Size:

Youth - M L XL

Adult - S M L XL XXL

I (we) hereby release the Lake View Chief Baseball Camp and its employees, San Angelo Independent School District, its Board of Trustees, administrators and employees, from all claims from injuries or illnesses which may be sustained by my (our) child, and authorize the director or his designee to select hospital facilities and/or physician of his/her choice, and authorize treatment of the named camper on a emergency basis in the event such treatment becomes necessary while attending the Lake View Chief Baseball Camp.

Parent (Guardian) Name _____ Date: _____

(please print)

Parent (Guardian) Signature _____

Please complete the application and return with check and/or cash, payable to: **Antonio Cortez**