



Falcons' Summer Camps 2025



Baseball Players –

Summer is quickly approaching! Are you looking for some baseball activities that will help improve your game? If you are, come join us for these fun, educational summer camps that will be held at the Cactus Shadows High School Freshman Field. The camps will be staffed by Coach Guy Gianni, former professional players, and current college players. For the past 25+ years, Coach Gianni has been coaching players of all ages and at all levels. He has been a direct part of his players' advancement to levels beyond high school and college. If you have any questions or wish to save your spot in one of these camps, please e-mail Coach Gianni at guygianni@gmail.com.

Camp A:	Hitting Camp (All Ages)	May 27, 28 & 29	8:00 am – 9:30 am	(\$125.00)
Camp B:	Infield Camp (All Ages)	May 27, 28 & 29	9:45 am – 11:15 am	(\$125.00)
Camp C:	Outfield Camp (All Ages)	May 30, June 2 & 3	8:00 am – 9:30 am	(\$125.00)
Camp D:	Catching Camp (All Ages)	May 30, June 2 & 3	9:45 am – 11:15 am	(\$125.00)
Camp E:	Advanced Hitting Camp (Ages 12-14)	June 4, 5 & 6	8:00 am – 10:00 am	(\$150.00)
Camp F:	Advanced Infield Camp (Ages 12-14)	June 4, 5 & 6	10:15 am – 12:00 pm	(\$150.00)

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Baseball Camp Release Form

In consideration of my child's participation in the Falcons' Baseball Camps, I hereby release and agree to indemnify and hold harmless Falcons' Baseball Camps, Cactus Shadows High School, its successors, assigns, officers, agents and employees from all claims, including liability for bodily injury of whatever kind, including loss of life or property arising out of said baseball camps. Furthermore, I acknowledge that there are risks inherent in my child's participation in baseball camps and I fully assume all such risks, hazards, and losses, which relate to such activities. I have read this waiver and know that baseball camp is a potentially dangerous activity. I hereby waive and release Falcons' Baseball Camps, Cactus Shadows High School, its successors, assigns, officers, employees, or agents from all claims or liabilities of any kind arising out of my child's participation in this activity. I hereby give my permission for my child's participation in camp activities at Falcons' Baseball Camps, Cactus Shadows High School. Should emergency medical treatment be needed, I authorize the coach and/or staff, if I cannot be reached by telephone or because of the emergency not allowing sufficient time to make contact, to act on my behalf to approve any reasonable medical treatment deemed necessary by a licensed physician and/or hospital.

Parent's Signature: _____ Parent's Name (print) _____

E-Mail Address: _____

In Case of Emergency, notify:

Name: _____

Relationship: _____

Phone: _____

Cell Phone: _____

Child's Name: _____

Select: Camp A Camp B Camp C Camp D Camp E Camp F

*Please make checks payable to Coach Gaetano Gianni
Mail to: Gaetano Gianni, 4605 E. Happy Coyote Trail, Cave Creek, AZ 85331
or Venmo @Gaetano-Gianni*