

# FIGHTING ILLINI

BASEBALL

## 2016 FALL ID SHOWCASE CAMP

ILLINOIS FALL ID SHOWCASE CAMP IS AN OPPORTUNITY TO BE SEEN BY ILLINOIS BASEBALL STAFF ALONG WITH OTHER DIVISION I, II, III, AND JC COACHES. THIS CAMP WILL ALSO GIVE YOU AN OPPORTUNITY TO RECEIVE ADVANCED INSTRUCTION BY ILLINOIS BASEBALL STAFF!

OCTOBER 9TH



TENTATIVE SCHEDULE

### POSITION PLAYER

8:30 - 9 AM  
9 - 12 PM

CHECK IN  
STRETCH

60'S  
DEFENSIVE EVALUATION/SKILL INSTRUCTION  
OFFENSIVE EVALUATION/SKILL INSTRUCTION

### PITCHER & CATCHER

12 - 12:30 PM  
12:30 - 4:30 PM

CHECK IN  
STRETCH/INSTRUCTION  
BULLPEN SESSION  
CATCHER EVALUATIONS

AGE: 9-12 GRADE

LOCATION: ILLINOIS FIELD | 1605 S WRIGHT ST, CHAMPAIGN, IL 61820

PARKING: ADJACENT TO FIELD

## 2016 BASEBALL ID SHOWCASE CAMP

CAMPER NAME \_\_\_\_\_

PARENT/GUARDIAN'S NAME \_\_\_\_\_

HOME PHONE \_\_\_\_\_

EMERGENCY OR CELL PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

TSHIRT SIZE \_\_\_\_\_

HIGH SCHOOL \_\_\_\_\_

2016-2017 GRADE \_\_\_\_\_

PRIMARY POSITION \_\_\_\_\_

SECONDARY POSITION \_\_\_\_\_

ARE YOU A RETURNING FIGHTING ILLINI CAMPER?  YES  NO

OCTOBER 9

- POSITION PLAYER (\$120)  
 PITCHER/CATCHER (\$120)  
 BOTH SESSIONS (\$150)

AMOUNT DUE: \$ \_\_\_\_\_

METHOD OF PAYMENT:

CASH  MONEY ORDER  CHECK (PAYABLE TO UNIVERSITY OF ILLINOIS)

CREDIT CARD:  MASTERCARD  VISA  DISCOVER  AMEX

CREDIT CARD # \_\_\_\_\_

EXP. DATE \_\_\_\_\_

V-CODE \_\_\_\_\_

"I HEREBY ACKNOWLEDGE THAT PARTICIPATION IN THE CAMP AND RELATED ACTIVITIES INVOLVES AN INHERENT RISK OF PHYSICAL INJURY OR LOSS THAT MIGHT BE SUSTAINED BY MY CHILD. IN CONSIDERATION FOR ACCEPTING MY CHILD INTO THE CAMP, I ASSUME ALL RISK OF INJURY AND LOSS THAT MAY BE SUFFERED BY ME OR MY CHILD AND RELEASE AND FOREVER DISCHARGE THE BOARD OF TRUSTEES OF THE UNIVERSITY OF ILLINOIS, ITS OFFICERS, EMPLOYEES AND AGENTS FROM ANY AND ALL KNOWN LIABILITY OF WHATEVER KIND OR NATURE, ARISING FROM AND BY REASON OF ANY AND ALL KNOWN AND UNKNOWN, FORESEEN AND UNFORESEEN BODY AND PERSONAL INJURIES, INCLUDING DEATH, PROPERTY DAMAGE AND THE CONSEQUENCES THEREFORE RESULTING FROM THE REGISTRANT'S PARTICIPATION IN OR INVOLVEMENT WITH THIS CAMP OR PRESENCE ON UNIVERSITY PROPERTY, INCLUDING ANY FAILURE OF EQUIPMENT OR DEFECT IN THE PREMISES, EXCEPT TO THE EXTENT CAUSED SOLELY BY THE WILLFUL AND WANTON MISCONDUCT OF THE UNIVERSITY.

I GIVE PERMISSION TO THE UNIVERSITY OF ILLINOIS TO TAKE PHOTOGRAPHS AND VIDEOS OF MY CHILD DURING THE COURSE OF THE CAMP ACTIVITIES. THESE PHOTOGRAPHS MAY BE USED FOR PUBLICITY PURPOSES BY THE UNIVERSITY OF ILLINOIS."

PARENT/LEGAL GUARDIAN SIGNATURE \_\_\_\_\_

QUESTIONS? CALL THE SPORT CAMPS & CLINICS OFFICE AT 217-244-7278

COMPLETED FORM CAN BE MAILED TO  
UNIVERSITY OF ILLINOIS SPORT CAMPS & CLINICS  
1700 S. FOURTH STREET | CHAMPAIGN, IL 61820

**HAIL** *to the*  
**ORANGE**