

## Health & Liability Form

Camper's Name \_\_\_\_\_

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

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Camper's Home Phone \_\_\_\_\_ Parent/Guardian Business Phone \_\_\_\_\_

→ List any physical conditions that the SuperCamps Staff or a physician should be aware of (i.e., allergies, reoccurring illnesses, disabilities, chronic illnesses, etc.) \_\_\_\_\_

→ In case of injury, I understand that I will be contacted during the child's examination in the emergency department. If I am not available, please contact:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

List month and year in which this camper received the following immunizations:

Hamophilus Influenza B \_\_\_\_\_ Hepatitis B \_\_\_\_\_ Varicella (Chicken Pox) \_\_\_\_\_

Diphtheria \_\_\_\_\_ Tetanus \_\_\_\_\_ Measles \_\_\_\_\_ Mumps \_\_\_\_\_

Rubella \_\_\_\_\_ Poliomyelitis \_\_\_\_\_ Whooping Cough \_\_\_\_\_

NOTE: The immunization information MUST be completed in order for your child to participate!

Insurance Co: \_\_\_\_\_ Subscriber Name: \_\_\_\_\_

Subscriber ID#: \_\_\_\_\_ Plan #: \_\_\_\_\_ Group #: \_\_\_\_\_

→ In the event that I am unavailable for purposes of providing parental consent, I hereby authorize the SuperCamps & SuperClinics staff at the host facility, or a physician to provide such hospital care that includes routine diagnostic procedures and medical treatment as necessary for my child.

I understand that the consent and authorization granted herein does not include major surgical procedures and is valid only during the SuperCamp for which my child is registered.

→ I understand that neither SuperCamps & SuperClinics nor the host facility provides medical insurance for campers, and that in the event of injury requiring treatment, hospitalization, and/or surgery, our family medical insurance must be used, and I further represent that such insurance will be in effect during my child's camp stay.

→ I agree to assume full responsibility for any damages to property as a result of my child's actions while at camp. I further agree to reimburse the host facility for said damages.

→ I hereby waive and release SuperCamps & SuperClinics and the host facility from any and all liability for any injuries incurred by my child while attending camp.

→ I understand that my child is not to have a car on campus, and I have verified this with my son/daughter. Failure to comply will result in dismissal from camp.

→ I have read and accept the earlybird discount program and refund policy within.

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

# Things to Know

## MEDICAL INSURANCE

### SuperCamps & SuperClinics

does not provide medical insurance for campers!

In the event of illness or injury requiring treatment, hospitalization, and/or surgery, family medical insurance must be used. SuperCamps & SuperClinics strongly recommends that camp participants be covered by personal/family insurance. Insurance information must be provided on the attached registration/health form. The signature of a parent or guardian granting permission to administer medical attention, if necessary, is required on the registration form. Medical care is provided by EMT's and certified athletic trainers, and care is available during the camp sessions and in the residence hall areas in the evening and at night. Medical emergencies are referred to the Health Center at the host facility or to area hospitals if necessary.

### REGISTRATION

1) Complete the enclosed registration form. **BE SURE TO COMPLETE BOTH SIDES, INCLUDING THE REQUIRED HEALTH / IMMUNIZATION AREAS!** Send your registration to:

SuperCamps, PO Box 541,  
Canandaigua, NY 14424.

2) A non-refundable deposit must be enclosed with your registration, and received by July 1st to reserve your spot! Full payment must be received by July 15th or SuperCamps has the right to go to its waiting list. \*\*A \$25.00 late fee will be charged for all new registrations and final payments received after July 15th. There will be **NO EXCEPTIONS** to this policy. Please forward final payments and/or applications in a timely fashion. Thank you.

### EARLYBIRD DISCOUNTS

• If applications/paid in full amounts of four or more participants from one team/school are submitted together in one envelope by May 1, 2010, a total of \$20.00 per person may be taken!

### REFUNDS

• Refunds will be given for medical reasons only! Upon receipt of a doctor's note, the participant will be given full credit toward a future SuperCamp or SuperClinic.

### OTHER

• Upon receipt of your application, a confirmation letter will be mailed out containing detailed information regarding directions, what to bring, registration/pick-up times, etc.

• Commuters attend 8:30 AM - 9:00 PM (lunch/dinner provided)

• Make checks payable to:

### SuperCamps & SuperClinics

**SuperCamps & SuperClinics** has a N.Y.S. Dept. of Health permit to operate and is inspected twice yearly.

Inspection reports and required health plan will be on file and available for review.

## PLEASE REMEMBER!

Enrollment is **LIMITED**, and registrations will be accepted on a "first-come/first-served" basis! **Don't delay!-Mail today!**

Questions?... Call Coach Guy at (585)394-4299.

SuperCamps and SuperClinics  
presents...

Celebrating our  
21st Year!

2010

# Youth Baseball SuperCamp

at Finger Lakes  
Community College  
Canandaigua, New York

August 1st-5th

Boys in  
Current Grades 3rd-9th

## PARENTS

*Do you desire a camp that provides a positive, well-rounded experience for your son? Do you insist on a safe environment, and experienced staff and quality supervision during your son's stay? Would your son benefit from a camp that emphasizes SKILL DEVELOPMENT and FUNDAMENTALS, rather than the "games only" approach taken by other camps? Would you like all of this at a reasonable rate?*

***Our SUPERCAMP is all of this and more!***

## We Teach Skills!

*SuperCamps is a comprehensive skills camp teaching baseball skills by caring, motivational and successful coaches.*

***At SuperCamps, Fundamentals are... FUNDAMENTAL!***

## Let our experience be your guide!

*You will learn skills! We Promise... Players will leave this camp with an evaluation and off-season training program to further continue their development.*

Check us out on our web page at

**www.supercampsandclinics.com**

(Additional brochures available on-line!)

## WHAT IS THE SuperCamp DIFFERENCE?!

Our staff has been carefully selected and includes some of the best baseball coaches in the area. They are here to **TEACH** and make you a total player. We have proven, successful coaches! Check us out!

We teach **FUNDAMENTALS!** Our emphasis is on skill development. Players have easy access to indoor facilities and outdoor fields. Unlike other camps, we **DO NOT** need to bus our participants to other sites. All facilities are within a short walking distance, including our excellent dining facilities and spacious suite-style residence halls.

### EACH CAMPER RECEIVES...

- ✓Free SuperCamp T-SHIRT!
- ✓Free Personal Water Bottle!
- ✓Quality Individual & Group Instruction!

### LIMITED ENROLLMENT

Enrollment is limited to 120 athletes, not the 300+ that some camps try to fit into a week. This ensures that each camper will receive the **INDIVIDUAL ASSISTANCE** he deserves. Our emphasis is on **TEACHING** the fundamentals of baseball and developing the **SKILLS** necessary for our athletes to excel. We believe the **QUANTITY** of athletes in attendance is not nearly as important as the **QUALITY** of the instruction they receive.

## The Program

This is a camp for boys in grades 3–9 who like the game of baseball and are interested in learning more about the game while having fun. The program is designed to provide instruction in the fundamentals of baseball. This instruction will be given by college coaches, high school coaches, and college players.

An emphasis will be placed on proper throwing, fielding, and hitting mechanics with a variety of take-home drills explained for each.

Drill segments and game play will be geared so that all players, beginning and advanced, will experience success.

In addition to having fun, we will attempt to convey the importance of the hard work, repetition, and desire needed to play at higher levels.

## WHAT MAKES A GREAT BASEBALL CAMP? THE COACHING STAFF

### CAMP DIRECTOR

#### NICK AMATULLI - Newark High School

- Twenty six years of previous baseball coaching experience.
- Newark High School: Modified, JV, Varsity (Finger Lakes East Coach of the Year.
- Canandaigua Academy: Volunteer Varsity Assistant.
- Cohocton Red Wings: Head Coach – New York State Summer Collegiate Baseball League.
- Newark Barge Bandits: Assistant Coach – North Atlantic Independent Professional Baseball League.
- Currently, longtime Assistant Baseball Coach at Finger Lakes Community College.
- Has been a guest speaker and clinician at numerous area baseball camps and clinics, most recently for the US Baseball Academy.

### FEATURED GUEST SPEAKERS AND CLINICIANS

#### Jason Bunting

Head Baseball Coach at Greece Athena High School  
6 Time Sectional Champs / Section V Coach of the Year /  
3 Time NYS Tournament Finalists

#### Sean Rucker

Head Baseball Coach at Victor High School  
Section V Coach of the Year / 5 time Sectional Champs /  
2004 New York State Champs

#### Mark Magliocco

Head Baseball Coach at Aquinas Institute  
Section V Coach of the Year / 2009 NYS Champs

#### Denny Miles

Head Baseball Coach at Wellsville High School  
10 Time Sectional Champs / Winningest Active Coach in Section V Baseball;  
2nd All-Time

#### Jeff Murphy

Head Baseball Coach at Hilton High School  
Section V Coach of the Year / 2008 Section V Champs

#### Joe Mauro

Head Baseball Coach at Hornell High School  
Section V Coach of the Year / 4 Time Sectional Champ

#### Marty Olmstead

Head Baseball Coach / 2010 Major League Baseball Summer Overseas Envoy  
Program / 5 Time Finger Lakes Coach of the Year / 6 Time League Champs

#### Dale Werth

Head Baseball Coach at Canandaigua Academy / 2009 Finger Lakes East

*The Supercamps staff will include other quality High School coaches and Collegiate coaches, as well as college players to serve as junior instructors and aid in supervision.*

## CAMPER REGISTRATION FORM

Camper's Name \_\_\_\_\_

School Name \_\_\_\_\_

School Address \_\_\_\_\_

Campers Age \_\_\_\_\_ Campers' Height \_\_\_\_\_

Usual Position \_\_\_\_\_

Coach's Name \_\_\_\_\_

Coach's Home Phone \_\_\_\_\_

Camper's Email Address \_\_\_\_\_

Your Grade in  
School as of  
May 1, 2010  
Grade \_\_\_\_\_

Please check the SuperCamp You Wish To Attend, and indicate payment below

	Check One Below	Full Payment	Deposit
<b>YOUTH BASEBALL CAMP</b>	<b>Basic Fees (If paid in full by July 1st)</b>		
	Resident Camper	___\$385	___\$150
	Commuter	___\$335	___\$150
<b>AT</b>	Day Camper	___\$235	___\$150
<b>FLCC AUGUST 1st-5th</b>	<b>Basic Fee (If paid in full after July 1st)</b>		
	Resident Camper	___\$410	___\$150
	Commuter	___\$360	___\$150
	Day Camper	___\$260	___\$150

(for office use only)

F

P

Check #: \_\_\_\_\_

Total Amount Remitted:  
\_\_\_\_\_

PLEASE NOTE: This form may be photocopied for other teammates. Upon receipt of your Registration/Health Form, a confirmation will be sent to you. Please keep the other half of this form, which contains additional information for campers. You will receive additional information and details from your coach.

T-Shirt Size...

(Circle One!)

Medium

Large

X-Large

Roommate Request

(One name only) \_\_\_\_\_

Make checks payable to:

**Supercamps & SuperClinics**

Send completed (both sides!) registration form,  
along with payment to:

**Supercamps & SuperClinics,  
PO Box 541, Canandaigua, NY 14424.**

**You MUST complete the  
MEDICAL/HEALTH FORM  
on the reverse side of this page!**