

## Nebraska Baseball Academy/2011-12 Winter Camp Schedule

X	Camp	Date(s)	Time	Location	Price
	<b>Hitting Camp</b>	Sunday, December 4	Noon – 3pm	Haymarket Park Indoor Facility	90.00**
	<b>Pitching Camp</b>	Sunday, December 4	3:30 – 6:30pm	Haymarket Park Indoor Facility	90.00**
	<b>Catching Camp</b>	Sunday, December 4	3:30 – 6:30pm	Haymarket Park Indoor Facility	\$90.00**
	<b>Comprehensive Hitting Camp</b>	Sundays: January 22, 29; February 5, 12	Noon – 2pm	Haymarket Park Indoor Facility	\$140.00**
	<b>Comprehensive Pitching Camp</b>	Sundays: January 22, 29; February 5, 12	2:30 – 4:30pm	Haymarket Park Indoor Facility	\$140.00**
	<b>Comprehensive Catching Camp</b>	Sundays: January 22, 29; February 5, 12	2:30 – 4:30pm	Haymarket Park Indoor Facility	\$140.00**
	<b>Spring Break All Skills Camp</b>	Monday and Tuesday March 12 & 13, 2012	8am – 10am	Haymarket Park Indoor Facility	\$90.00**

### Step 1: REGISTRATION (please print)

Participant Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (Fall/2011) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone/Home \_\_\_\_\_ Phone/Cell \_\_\_\_\_

Primary Position: \_\_\_\_\_ **All Participants will receive a FREE camp t-shirt! Please indicate size below:**

\_\_\_ Youth (10/12) \_\_\_ Youth (14/16) \_\_\_ Adult S \_\_\_ Adult M \_\_\_ Adult L \_\_\_ Adult XL

Those registering for the Spring Break All Skills Camp will also receive a FREE general admission ticket to the Nebraska vs. South Dakota State baseball game on Tuesday, March 13, 2012 (game time is scheduled for 1:35pm).

#### \*\* SPECIAL NOTE

Please be advised that on-line registration saves you \$5.00 per camp. We strongly encourage you to use the on-line registration feature; not only is it secure but it's also the quickest way to get registered for camp. Give it a try at: [www.bigredacademy.com](http://www.bigredacademy.com)

### Step 2: PAYMENT

**Check** (Checks payable to Nebraska Baseball Academy)

**Credit Card** - please consider on-line registration at [www.bigredacademy.com](http://www.bigredacademy.com)

\_\_\_ VISA \_\_\_ MasterCard \_\_\_ Discover \_\_\_ American Express

Credit Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_

Name As It Appears on Card \_\_\_\_\_

Amount \$ \_\_\_\_\_ Verification # \_\_\_\_\_ (last 3 digits on back of card; 4 digits for American Express)

Authorizing Signature \_\_\_\_\_

**Step 3: THE FOLLOWING MUST BE COMPLETED IN ORDER FOR THE CAMPER TO ATTEND CAMP**

Camper Name \_\_\_\_\_ Camp \_\_\_\_\_

**Liability Release and Indemnity Agreement**

I hereby request that you accept this application for enrollment in the Nebraska Baseball Academy during the dates set forth in this application. I hereby release the Board of Regents of the University of Nebraska, all its employees and the Nebraska Baseball Academy and its agents from all participant claims on account of any injuries which may be sustained by me while attending the Nebraska Baseball Academy and I agree to indemnify the Board of Regents of the University of Nebraska and its employees and the Nebraska Baseball Academy and its agents for any claim which may hereafter be presented by me as a result of any such injuries.

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Insurance**

All participants should be covered by a personal medical insurance policy. Each camper is asked to supply the company name, address, policy # and policy owner. Accident insurance provided by the camp is on an excess basis.

Insurance Company \_\_\_\_\_ Address \_\_\_\_\_

Owner \_\_\_\_\_ Policy # \_\_\_\_\_

**Medical Certification**

This medical certification requires a doctor's signature **OR** the camper may use his/her 2011-12 form required by his/her school.

I hereby certify that \_\_\_\_\_ is physically fit to participate in an active baseball camp during the days of the camp he/she has registered for and that I know of no physical impairments which would in any manner limit his/her participation in such a program.

Doctor's Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

It is the policy of the Nebraska Baseball Academy to admit all qualified applicants without regard to disability, race, color, religion, national or ethnic origin, or sexual orientation.

<b>Mail registration form &amp; payment to:</b>	
Nebraska Baseball Academy PO Box 880160 Lincoln, NE 68588-0160	If you have questions, please contact: <b>Renee Brinkmann</b> <b>Academy Coordinator</b> <b>402-472-2269</b> <a href="mailto:rbrinkmann@huskers.com">rbrinkmann@huskers.com</a> <b>402-472-9641 (FAX)</b>

<p align="center"><b>Nebraska Baseball Academy Refund Policy</b></p> <p>If you contact our office within 3 working days after the camp, you will have the following options:</p> <p>Option I: 50% refund Option II: FULL credit voucher good for any Nebraska Baseball Academy Camp (expires after one year of issuance)</p>
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[www.bigredacademy.com](http://www.bigredacademy.com)