



# Catholic High Baseball

# Summer Camp '09

**When: June 22-25**

**Where: Catholic High School**

**Time: 9:00am - 1:00pm**

**Grades: Incoming 5th - 9th Graders**

**Cost: \$80.00**

**Questions? E-mail Coach Jordan: [djordan@chspanthers.com](mailto:djordan@chspanthers.com)**

- **Bring baseball pants, cleats, tennis shoes, gloves and bats (If you have one)**
  - **Rainouts will be made up in the afternoons or the following week**
  - **Concessions will be sold, Banks can be set-up for campers**
  - **Full payment is due with registration, No refunds**

## Camp Application

Full payment of camp fee (\$80.00 per applicant) must accompany this application.  
**NO REFUNDS!**

Please fill out the application below and return to the address on the flyer.  
Checks should be made payable to Catholic High School.

**Mail to: Catholic High School  
Baseball Camp  
1301 De LaSalle Dr.  
New Iberia, LA. 70560**

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

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

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

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
School

\_\_\_\_\_  
E-mail Address

T-Shirt Size:  YS     AS     AXL  
 YM     AM  
 YL     AL

Age \_\_\_\_\_  
 I hereby request my son be admitted to Catholic High School Baseball Camp and authorize the camp director to act for me according to his best judgment in any emergency requiring medical attention for which services I shall pay.

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