



12999 Murphy Road, Bldg. H-1, Stafford, TX 77477 * 713-269-0678

2009 Summer Baseball Camp @ WEST UNIVERSITY Main Campus - University Blvd.

Texas Baseball Academy would like to invite your young baseball player to another TBA summer camp held at the West University Little League Field Complex on University Blvd. Each camp will be held Monday through Thursday from 9:00 am - Noon, with Friday as a rain make up day if needed and the cost is \$160.00 per camp session or daily fee of \$50.00. Texas Baseball Academy staff will conduct a series of stations in throwing, fielding, catching and hitting that will provide the opportunity for each camp participant to learn and practice the skills necessary to play the game of baseball competitively, while also having fun playing competitive games.

**** Players should bring baseball equipment and baseball shoes. Money for concessions if desired.**

Summer Camp 2009 Schedule

Ages: 5 - 6 & 7 - 11 Monday - Thursday 9am - Noon

Camp 1 June 1 - 4	Camp 5 June 29 - July 2	Camp 9 August 3 - 6
Camp 2 June 8 - 11	Camp 6 July 13 - 16	Camp 10 August 10 - 13
Camp 3 June 15 - 18	Camp 7 July 20 - 23	
Camp 4 June 22 - 25	Camp 8 July 27 - 30	

Cost of Camp: \$160.00 Daily Cost: \$50.00
Make Checks Payable to: Texas Baseball Academy or TBA

To Reserve a camp slot call David Moss at **713-269-0678** or email at ddmossey@swbell.net

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Player's Name: _____ Age: _____ Parent/Guardian: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Emergency Phone: _____

Email: _____ Camp #: _____

Authorization and Release

I hereby release Texas Baseball Academy and its instructors for, from and against any and all liability, injury sustained, damage to or loss of personal property arising directly or indirectly while enrolled in a Texas Baseball Academy Camp. I acknowledge my child/ward is participating in the Baseball Camp at his/her risk. I hereby authorize Texas Baseball Academy to secure medical attention for my child/ward in any emergency where they deem it appropriate. I certify that I currently have medical/hospitalization insurance:

Company: _____ Policy#: _____

Parent Signature: _____ Date: _____