

Rob Nosari's **Single Day Fall Baseball Camp**



Camp Summary

Rob Nosari's Single Day Fall Baseball Camp will provide each camper with individual and small group baseball instruction in a positive atmosphere. Our single day fall baseball camp will provide instruction in the four baseball fundamental skills:

Hitting

Fielding

Throwing

Baserunning

For Campers Ages 7-12

Date: Thursday, October 3, 2024

Time: 9:00AM- 12:00PM

Location: Sayen Park, (Nottingham Little League)
130b Mapleshade Ave, Mercerville-Hamilton Square, NJ 08690

Cost: \$40

Register Online:

Schedule 9:00-12:00
9:00–9:10: Check-in and welcome 9:10-9:30: Throwing program 9:30-10:00: Fielding stations 10:00-10:30: Hitting stations 10:30-10:45: Baserunning stations 10:45-12:00: Baseball games

IMPORTANT REMINDERS!:

1. **Please alert us of any allergies, medical conditions or other important medical details.*****
2. Please dress children in comfortable clothing.

Register Online Here: <https://www.nllnj.org/>

For more information please call or text Rob Nosari at 609-802-2710 or email rnosari14@gmail.com

3. Lunch is not provided by the camp.

Camper Name:_____ Camper Age:_____

I, the undersigned parent/guardian of the individual named above, a minor, do hereby agree to allow the individual named herein to participate in the aforementioned activity and authorize the program directors and/or instructors as Agents for the undersigned to consent to Medical, Surgical and/or Dental Examination, in addition to any and all other Treatments that may be deemed necessary by medical personnel. It is understood that this activity involves an element of risk and a danger of accidents and knowing those risks, I hereby assume those risks. In addition, I understand that by signing this agreement, I hereby release and discharge Robert Nosari from any and all liability resulting in injury associated with participant's participation in this activity. I agree that pictures taken during program hours may be used for future promotional purposes. In the absence of a parent/guardian's signature below, payment of fees and participation in the program shall constitute acceptance of the conditions set forth in the release. Robert Nosari will not provide health and/or accident insurance for program participants.

X_____

Date:_____

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