

REGISTRATION

NAME _____

ADDRESS _____

City/State/Zip _____

Age ____ Grade ____ DOB _____

Parents/Guardians _____

E-mail _____

I hereby request and grant permission to coaches/instructors of the Lassiter Baseball Clinic to provide reasonable care to my child named above, in the event of injury or illness during the winter clinic if I am not present. Such care may include, but is not limited to, first aid treatment, transporting to a medical facility or the summoning of emergency assistance. For and in the consideration of allowing my child to participate in the winter clinic, I, the undersigned parent or appointed guardian of the above child, do hereby agree to indemnify and hold harmless the Lassiter Baseball Booster Club, its coaches and instructors and Lassiter High School from any and all liability from the above named child's activities of any nature with said organization.

Signed _____

Relationship to Child _____

Date _____

T-Shirt Size **YM YL YXL S M L XL**

Checks should be made payable to:

Lassiter Baseball

Return application and \$100.00 fee to:

Lassiter Baseball Club
c/o Brad Ankerholz
P.O. Box 158
3605 Sandy Plains Rd., Suite 240
Marietta, GA 30066-3066

Or drop off at Lassiter High School:

c/o Scott Kelly

Lassiter Baseball Club
c/o Brad Ankerholz
P.O. Box 158
3605 Sandy Plains Road, Suite 240
Marietta, GA 30066-3066

2012 LASSITER TROJANS WINTER BASEBALL CLINIC



**JANUARY 23-26, 2011
6:00-8:00 PM
DAILY**

AGES: 6 YEARS OLD- 8TH GRADE

**LASSITER BASEBALL COMPLEX
LASSITER HIGH SCHOOL
MARIETTA, GEORGIA**

2012 CLINIC STAFF

JOHN MIKE VIDIC

Former Lassiter/Tulane Player

BRANDON MAY

Former Lassiter/Alabama Player,
Infielder-Chicago Cubs organization

RYAN PEISEL

Former Lassiter/UGA Player,
Infielder-Colorado Rockies organization

LASSITER BASEBALL RETURNING PLAYERS



EQUIPMENT CAMPERS SHOULD BRING DAILY

Bat and Batting Gloves
Glove

Protective Cup
Baseball Cleats

Catching Equipment (if applicable)
Baseball Attire (Warm Clothes)

CLINIC INFORMATION

Clinic Fee: \$100 per player

\$800 per team

Clinic day registration is welcome.

Ages: 6 years old through 8th grade

- Valuable field time-Coaches can turn this into an 8-hour practice session for their teams.
- Clinic format-Daily two hour sessions for one week. There will be instruction as well as practice repetitions for all campers.
- We will work rain or shine. Work will be done indoors if weather is wet.
- Clinic sessions will be held at one of the finest High School facilities in the nation-indoor cage fully equipped with the latest hitting tools along with an immaculate playing field.
- Clinic emphasis is on the fundamentals of the game: Swings, Groundballs, Flyballs, Pitching Mechanics
- Bullpen session for all pitchers will focus on pitching mechanics.
- Clinic format will resemble a normal Lassiter practice. Teams will be kept together.
- Each player will receive a camp T-Shirt.
- Returning Lassiter players will serve as clinic instructors.

“The Lassiter Baseball camp will give your child the chance to work on all the skills vital to the game. Along with the mechanical improvements to each camper’s game, we hope each kid leaves our camp with the respect and love of the game that is shared within our program. Finally, it is our utmost desire to exemplify to each participant the traditions that have made Lassiter Baseball a nationally recognized program.”

----Scott Kelly, head coach

Questions concerning this Clinic can be referred to:

Email: Scott.Kelly@cobbk12.org



NATIONAL CHAMPIONS

1999

STATE CHAMPIONS

1999-2006

STATE RUNNERUP

'95-'97-'00-'02-'05-'10

REGION CHAMPIONS

'95-'97-'99-'03-'05-'06-'08-'11