



COLUMBIA STATE BASEBALL

FALL INSTRUCTIONAL LEAGUE!



Learn the skills that are needed to become a college baseball player! Columbia State baseball program is proud to host one of the best fall instructional leagues in the south. All high school players who are in grades 9-12 are welcome to join. Beginning the weekend of Saturday September 26th and running through Saturday November 7th, each week players will receive instruction on how to develop all the skills needed to become a better baseball player. This is an instructional camp that will help players of all skill levels. Our league will focus on player instruction and development!

- League is open to all players in grades 9-12.
- Pro Style workout will be conducted on Saturday September 26th in order to showcase player skill level and developmental needs along with helping in the organization of teams.
- League will consist of at least four teams (no more than six teams will be allowed). Each team will have 12-15 players on a team.
- Each team will play 11 games- weather permitting.
- Pitchers will be held to strict pitch count.
- Each team will receive one hour of fundamental instruction prior to each game.
- Emphasis will be on SKILL Development during game situation.
- Cost is \$150.00 prior to September 25th, \$175.00 on September 26th.
- You will receive confirmation of registration via email.

-Registration will be allowed on Saturday September 26th, price will be \$175.00.

-If you have questions please feel free to call assistant Coach Mathew Little @ (601) 624-1118 or assistant Coach Ryan Pflieger @ (513) 476-6918.

“Our staff will be there each and every game to insure that your son is receiving the very best collegiate level instruction. Our goal is give area players the opportunity to improve their knowledge of the game during a time of the year when baseball opportunities are limited.” -Head Coach Mike Corn

Registration and Waiver Form

I execute this Agreement in consideration of my child being permitted by Columbia State Community College to participate in the 2009 Columbia State Community College Fall League. I understand that the League will include but not be limited to the following activities:

- Vigorous physical exercise including running and jumping.
 - Instruction and participation in baseball games and drills.
- I represent and warrant that my child is in good physical condition and is able to safely participate in the Baseball League.
 - I recognize that there are risks and hazards directly or inherently involved, making these and related activities potentially dangerous. With full knowledge and appreciation of these potential risks and hazards, I voluntarily grant permission for my child to participate in these activities and assume all responsibility and risk from his/her participation in these activities, including all risk of loss of limb or life, property damage, or injury to others.
 - I, on behalf of myself, my child, our family, heirs and legal representatives release Columbia State Community College, its students, agents, employees, officers, and trustees, from any liability for damage or loss to my child's person or property which may arise out of his or her participation in baseball League.
 - I grant permission for Columbia State Community College, its students, agents or employees to obtain necessary medical attention in case or sickness or injury to my child. I consent to any necessary medical examination, diagnosis, or treatment and agree to be responsible for costs of such medical services.
 - I have fully informed myself of the contents of this Agreement by reading it before I signed it.

Name of League Participant _____ Parent or Legal Guardian _____ Date _____

Personal Physician and phone number: _____

Health Insurance Company and Policy Number: _____

Identify any past or current medical conditions and allergies knowledge of which may be necessary for effective medical treatment: _____

Current Medications: _____

Player Information

Name _____ Age _____ Current Grade _____ High School _____

Player's Cell# _____ Guardians' names and cell #'s _____

Home address _____

City, State, Zip _____

E-mail address (IMPORTANT for confirmation of registration) _____

Top Two primary positions on the field: 1. _____ 2. _____ • Shirt Size (L,XL,XXL) _____

Preferred teammates for carpool reasons _____

*****Make checks payable to Head Coach Mike Corn*****

Columbia State Baseball ● 1665 Hampshire Pike ● Columbia TN, 38401