



## **2018 MSUB Baseball Batspeed Camp**

**November 6<sup>th</sup>, 8<sup>th</sup>, 11<sup>th</sup>, 13<sup>th</sup>**

**Ages: 10-13 (6:00-7:00pm) 14-18 (7:00-8:00pm)**

**Billings, MT: P.E. Building (Lower Gymnasium)**

### **Camp Description**

Don't miss this opportunity to work with the MSUB Baseball coaching staff in the offseason batspeed training program that was used by the Yellowjacket hitters the past two seasons. This program has effectively increased bat exit speed and overall power production for the Jackets the past two seasons by breaking school Home Run records both year. This also includes a nationally recognized offensive last year finishing in the Top 25 in the country in six major categories, breaking six all-time conference offensive records, one of which included the home run record in a season with 78.

Link to GNAC weekend series home run record video this past season: <https://youtu.be/RGZaQr03ABk>

Campers will not only learn the mechanics of how to use their body more efficiently to create bat speed, but will also be exposed to training methods such as overload/underload bats, medicine ball and resistance band programs incorporated into the swing mechanics, whipstick training, and much more!

### **Equipment**

Each camper must bring his own baseball equipment. Players should bring a bat, running shoes or turf shoes, hat, and any other equipment they feel necessary. The camp is not responsible for lost belongings.

### **Parking/Directions**

The Lower gym is located in the bottom floor of the Physical Education building next to the softball field. Parking is free after 5pm, so no need to buy a parking pass.



## **REGISTRATION FORM**

If you prefer you may register online at <http://www.msubbaseball.com> and click on the Batspeed Camp tab. There will be a small registration fee incorporated with online registration. If not, please fill out this registration form and send back to the address below.

Please provide the following detailed information and mail with your payment to:  
(No Credit Card payments accepted with mail-ins.)

Yellowjacket Sports Camps  
MSU-Billings (Athletics)  
1500 University Drive  
Billings, MT 59101

**If you prefer to deliver your pre-registration and payment, you may deliver them to the Athletic Department in the Physical Education Building (gymnasium). Please call 405-245-3122 or email [grant.hamilton2@msubillings.edu](mailto:grant.hamilton2@msubillings.edu) if you have any questions.**

Participant's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Class: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: (\_\_\_\_\_) \_\_\_\_\_ Other Phone: (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ T-Shirt Size: \_\_\_\_\_

Please Check:

\_\_\_\_ **Camp cost—\$100**

### **Added Features**

\_\_\_\_ **Hitter Video analysis -- \$50**

**Includes: Written evaluation from Yellowjacket staff & multi-angle video breakdown of swing**

**For more information, please visit us on the website: <http://www.msubbaseball.com/index.cfm>**

**Please make checks payable to Yellowjacket Sports Camps**

Payment Enclosed (Check Amount): \$ \_\_\_\_\_

**IMPORTANT NOTES: (1) ALL PARTICIPANTS AND AT LEAST ONE PARENT MUST READ AND SIGN THE AGREEMENT TO PARTICIPATE BELOW.**

**(2) MSU-BILLINGS DOES NOT PROVIDE INSURANCE TO PAY FOR INJURIES SUSTAINED BY CAMP PARTICIPANTS. PARENTS MUST AGREE TO PAY FOR AN INJURY THE CHILD MIGHT SUSTAIN.**

**AGREEMENT TO PARTICIPATE**

**(PRIOR TO PARTICIPATION, THIS DOCUMENT MUST BE SIGNED BY EACH PARTICIPANT AND AT LEAST ONE PARENT).**

Participation in individual and team sports activities is reasonably safe as long as certain guidelines are followed. Many sports and physical activities offer varying levels of aerobic and anaerobic training, conditioning, personal skill improvement, and competition experiences that can significantly improve muscular and cardiovascular (heart/lung) strength and endurance. Regardless of whether you compete in basketball, soccer, tennis, cross country, golf, softball, volleyball, baseball, cheerleading, or some other sport, it is extremely important you are healthy and physically fit in order to be prepared to practice and compete.

If you have any condition that might prevent you from participating safely or if you have had any previous injuries or complications from athletic participation, you are required to communicate that information to the leader of your sports camp or event prior to your participation. By voluntarily deciding to participate in this event, you are affirmatively acknowledging that you are both physically fit enough and skilled enough to train, practice, and compete in a safe and reasonable manner. If at any time you are uncertain of your physical condition or health status, you should not participate until you have communicated that information to your camp or event leader and you have been cleared to participate.

Although the likelihood is minimized if you participate carefully, there is always the possibility of injury when you place extra demands on the muscles, bones, joints, and ligaments in a training or competitive environment. Injuries that can occur as a result of your participation in this camp or event include but are not necessarily limited to the following: blisters; muscle strains; joint dislocations; ligament and joint sprains; joint soreness; abrasions; contusions; stress fractures; broken bones; and head, neck, and spinal cord injuries involving paralysis and even death. However, if you exercise care for your own safety and the safety of other participants, the likelihood of such injuries can be greatly reduced.

By signing this form, you are acknowledging that you know, understand, and appreciate the various risks associated with your specific sport or activity. Furthermore, you agree to accept and assume those risks inherent to your sport or activity. In addition, by signing this form, you know, understand, and agree to accept the financial cost of any injuries you might sustain while participating in this camp or event, as well as agree to let your son/daughter be treated for the injury by the MSUB staff and/or taken to the hospital if the MSUB staff deems it necessary. Finally, by signing this form, you acknowledge all of your questions, if any, have been answered to your satisfaction.

\_\_\_\_\_  
(Printed Name of Participant)

\_\_\_\_\_  
(Signature of Participant)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent if Participant is Under Age 18)

\_\_\_\_\_  
(Date)