

BELLINGHAM BELLS COACHES BASEBALL CAMP

6/26, 6/27 & 6/28 *10 AM-1 PM* Tuesday-Thursday

AGES: 6-12 year olds LOCATION: Joe Martin Field

\$125 includes t-shirt and ticket to Bells game on Wednesday 6/27

Early Bird Discount: Register by June 1 and receive \$20 off registration fee!



CONTACT INFORMATION

Bellingham Parks & Rec | 360-778-7000



Have fun and train with Bellingham Bells coaches Bob Miller, Jim Clem, Jake Whisler & Darrien Moran along with some of our Bells players. Live game action mixed in with baseball drills & skills, emphasizing the fundamentals of hitting, pitching, fielding and learning to compete with a great attitude.

PROG # 8568

What to bring to camp: glove, hat, sneakers, spikes, sleeves, long pants suggested for sliding, athletic “cup” protection (mandatory), bat & helmet (optional). Please mark your belongings.

Check-in Time: 9:30 AM daily check-in at Joe Martin Field. Parents are welcome to attend all sessions.

Register: Online at www.cob.org/ezreg; by phone at (360) 778-7000; or complete the form below and mail or bring to Bellingham Parks and Recreation, 210 Lottie Street, Bellingham, WA 98225. Questions? Call Bellingham Parks and Recreation at (360) 778-7000.

Discounts Available (Please call COB to register with these discounts at 360-778-7000):

- **Sibling Discount** – Register two or more campers & receive \$10 off each registration!
- **All Session Discount** – Register for Coaches Camp (6/26 - 6/28) & both Advanced Sessions (7/23 and 7/24) for \$200 (retail price \$250)

..... **Registration Form (Please Print)**

Program #: 8568

Bellingham Bells Coaches Baseball Camp

Register online: www.cob.org/ezreg



Participant Name _____ Parent Name _____
Address _____ City _____ State _____ Zip _____ Phone _____

Birth date _____ Grade ('18-'19) _____ **Shirt Size** YOUTH M L XL ADULT S M L XL XXL

Email Address (please print clearly) _____

To be eligible for a full refund, an individual must notify the Parks & Recreation Department of withdrawal before the program begins. Allowable refunds after the first day of the program will be pro-rated.

Parents or guardians must sign release below. I/We, realizing no insurance coverage is provided for the participants, will assume full financial responsibility for any cost relating to any accident or injury that might occur while my/our child participates in above-named program. Furthermore, I/We will not hold ALB-Div I, Hall of Fame Camps, Bellingham Baseball Club, LP, or the City of Bellingham, and all of their employees, volunteers or anyone otherwise involved in named programs responsible for any accident or injury that might occur.

The Bellingham Bells Coaches Advanced Clinic is NOT affiliated with, sponsored, endorsed, owned, or operated by the Bellingham Baseball Club, LP (the Bellingham Baseball Club). The Camp is owned by ALB Div 1 dba Hall of Fame Camps which is using the “Bellingham Bells” name, logos, symbols, and marks under a trademark license agreement.

Parent/Guardian Signature _____ (please print) _____ Date _____