

## **Aaron Swick**

### **Head Baseball Coach/Camp Director**

Aaron Swick is in his third year as the head coach at Willamette. He has lead the Bearcats to consecutive 4<sup>th</sup> place finishes in the Northwest Conference in 2009 and 2010. Coach Swick has also worked camps at the University of Oregon and the University of California at Berkeley. Swick has worked with various age groups over his career in baseball and has coached 25 players who have gone on to compete in professional baseball.

### **Willamette Bearcat/ Withnell Dodger Players**

During the camps, various players from this season's team will be at the camp helping with instruction. Willamette has produced many outstanding players over the last couple of years including 6 first-team all-conference players and an All-American. The Withnell American Legion team is one of the top teams in the region and looks to be the same this year.

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**To guarantee a spot in the clinic payment must be received by July 7th. Walk-ups will be allowed based on clinic enrollment. Limited space is available.**

### **FOR FURTHER INFORMATION CONTACT:**

**Aaron Swick - Camp Director  
Willamette University Baseball Office  
Department of Athletics  
900 State Street  
Salem, OR. 97301  
503-370-6011  
[aswick@willamette.edu](mailto:aswick@willamette.edu)**

# **WILLAMETTE BASEBALL SUMMER CAMPS**



## **2011 Camp Sessions**

**July 11 – July 13  
July 20 – July 22  
August 1 – August 3**

**9:00 am - 3:00 pm  
John Lewis Field  
Willamette University**

**For Players Ages 7-14**

**\$180 per session**

**REGISTRATION:**

For the WU Baseball Clinic, fill out the information below then mail this sheet to the address listed at the bottom of the page, along with your registration fee. The Registration fee is \$180.00, per session.

Name \_\_\_\_\_  
Address \_\_\_\_\_  
Email \_\_\_\_\_  
City \_\_\_\_\_  
State \_\_\_\_\_  
Zip \_\_\_\_\_  
Home Phone ( ) \_\_\_\_\_  
Parent's Work Phone ( ) \_\_\_\_\_  
Age \_\_\_\_\_  
Grade \_\_\_\_\_  
Height \_\_\_\_\_  
Weight \_\_\_\_\_

**Please check all appropriate session time(s):**

July 11 – July 13 \_\_\_\_\_

July 20 - July 22 \_\_\_\_\_

August 1 – August 3 \_\_\_\_\_

T-Shirt Size: YS YM YL YXL AS

**Make check payable to: Willamette Baseball**

If a camper has to leave the camp, or is unable to attend, a refund, less a \$30 administrative fee, will be mailed.

**Mail to: Willamette Baseball Camps  
Department of Athletics  
900 State Street  
Salem, Oregon 97301**

**WILLAMETTE BASEBALL CAMP**

**Pitching:** The program emphasis will be on all aspects of pitching with a concentration on proper throwing mechanics, strategies, philosophies, and mental approaches. A fundamental approach to mechanics will be taken with more advanced techniques instructed as needed.

**Hitting:** The program emphasis will be on all aspects of hitting and bunting. Learn the finer points of offensive production including the proper use of teaching aids, mental approaches, and techniques for developing more power and bat speed.

**Defense:** The program emphasis will be on the fundamentals of infield and outfield play. The finer points of both areas will be addressed as well as drills designed to improve defensive play.

**Speed and Agility:** This summer there will be instruction on how to train and do exercises that get a player into baseball shape. This is the same program that the Willamette Bearcats use during their season.

**Individual Instruction:** Each camper will receive individual instruction in all aspects of the game.

**FACILITIES:**

All clinic activities will take place in the newly renovated John Lewis Field/ “Spec” Keene Stadium at the Willamette University Sports Complex. (located in Bush’s Pasture Park near the intersection of Mission and Winter Streets)

**WHAT TO BRING:** LUNCH! Water bottle, hat, t-shirt, baseball glove, athletic shoes, baseball pants/sweats, jacket if needed, catching gear if you wish to catch.

**Release Authorization  
EMERGENCY TREATMENT**

I understand that I am required to maintain and carry accidental medical insurance coverage for the participant listed on this application and I verify that the coverage information attached herewith is accurate and true. This required coverage will be in full effect while participating in the program. In case of any emergency, I authorize the staff of Willamette Baseball Camps to obtain whatever medical transport and/or treatment necessary for the welfare of the participant listed on this application. All charges and fees incurred in the rendering of transport or treatment is my responsibility. I am the authorized parent guardian of this minor:

\_\_\_\_\_

And I am legally authorized to sign this release on their behalf.

\_\_\_\_\_  
**Parent/Guardian Signature Date**

\_\_\_\_\_  
**Insurance Carrier Policy Number**

**WAIVER OF LIABILITY, ASSUMPTION OF RISK, and INDEMNITY AGREEMENT**

**Waiver:** In consideration of being able to participate in any way in Willamette University’s Baseball Camps, I, for myself, my heirs, personal representatives or assigns, **do hereby release, discharge, waive, and covenant not to sue** the Willamette University, doing business as Volleyball Camps, its board, officers, employees and agents from liability **from any and all claims on Willamette University and it’s Baseball Camps, its board, officers, employees, and agents,** resulting in personal injury, accidents or illnesses (including death) and property loss arising from, but not limited to participation in Willamette University’s Baseball Camps.

**Assumption of Risks:** Participation in Willamette University’s Baseball Camps carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks range from 1) minor injuries such as scratches, bruises, and sprains to 2) major injuries such as eye injury or loss of sight, joint or back injuries, heart attacks, and concussions to 3) catastrophic injuries including paralysis and death. I have read the previous paragraph and I know, understand, and appreciate the repercussions of these and other risks inherent in Willamette University’s Baseball Camps. I hereby assert that participation is voluntary and that I knowingly assume all such risks.

**Location-**This waiver, assumption of risk and indemnity applies to any activity or action that takes place while being transported or located related to Willamette University’s Baseball Camps. This waiver, assumption of risk and indemnity is in effect at anytime myself, the participant, are present on campus or in any location associated with Willamette University’s Baseball Camps.

**Indemnification and Hold Harmless:** I also agree to INDEMNIFY and HOLD Willamette University and it’s Baseball Camps HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorneys fees brought as a result of involvement with the camp and to reimburse them for any such expenses incurred.

**Severability:** The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of Oregon and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

**Acknowledge of Understanding:** I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its **terms, and understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily and my signature is a complete and unconditional release of all liability to the greatest extent of the law.

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**Parent/Guardian Signature Date**