



Northview Baseball Freshman Academy

Get a head start with Northview Baseball!



*Northview Baseball
Freshman Academy
Northview High School
10625 Parsons Road
Johns Creek, GA 30097*

What you will experience:

- Northview Baseball Drills and Pregame.
- Learn expectations of the Northview Baseball Program.
- Get a preview of Pre-Season Workouts and Conditioning.
- Meet and work with the Northview Coaching Staff and Former Players.

Open to Rising 9th Grade Boys

Dates: June 10-12 (Tues through Thurs)

Location: Titan Field and the Baseball Building

Time: 9:00-12:00 (Tuesday and Wednesday)
9:00-1:30 (Thursday)

Cost: \$75.00

Why: The Northview Coaching Staff will introduce campers to the Northview Baseball program. Campers will rotate through offensive and defensive drills, fundamentals, introduce the Titan Baseball Conditioning Program, discuss the importance of academics and discipline and spend time developing the mental approach to Titan Baseball.

Important:

The Freshman Academy is intended for young men serious about playing at the high school level. Each day will be a focused period of instruction and intensity as an introduction to Titan Baseball.

For more information Contact:
DixonM@fultonschools.org or visit us at
www.Northviewbaseball.com

Camper: _____

School Attended Last Year: _____

Baseball Experience: _____

Team Played for Last Year: _____

Address: _____

Home Phone: _____ Work Phone: _____

*Please check appropriate T-shirt size:

Adult S Adult L Other _____

Adult M Adult XL

CHECKS TO: Northview Baseball
NO REFUNDS

MAIL APPLICATION & CHECK TO

Northview Baseball
Northview High School
10625 Parsons Road
Johns Creek, GA 30097

PARENT RELEASE:

I will not hold Fulton County Board of Education, Northview High School, Northview Titan Baseball Freshman Academy Camp, Northview staff, coaches or camp staff responsible for any injury to my child. This is to certify that I have insurance to cover any injury that might occur during participation of the camp.

The law requires that parental permission be obtained for emergency operative procedures on minors. The following consent form should be signed by the parent so that no unnecessary delays will occur with operative procedures. However, no operation will be performed, except emergency, without parents being contacted and fully informed. I give permission to administer over the counter medication as well as such diagnostic, therapeutic, and operative procedures as may be deemed necessary.

Print Name: _____ Date: _____

X _____