

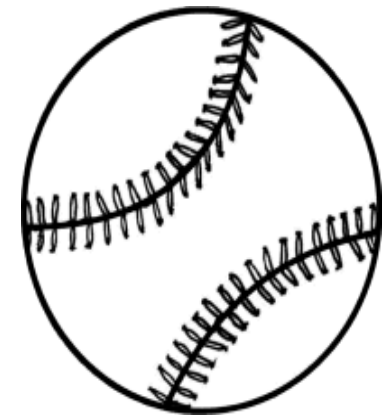


2014
Heights Softball
School

in partnership with
Mountainside Softball
Association

at
Deerfield School
Mountainside, NJ

June 30-July 3



DIRECTOR
Mike Roof –Head Girls Coach
Governor Livingston High School

Dear Prospective Campers and Parents,

Having the opportunity to coach has been a passion of mine for a long time. I understand the importance that athletics have in shaping a young person's life and hope to share my love of coaching with others. The overall goal at Heights Softball School is to provide a strong foundation of the game of softball through challenging yet enjoyable activities. The focus will be on the development of each individual's technical ability, in order to improve overall consistency and performance. The camp provides a competitive environment that will challenge our campers to bring their game to the next level.

Please feel free to contact me with any further questions or to discuss the camp in further detail. I look forward to seeing you at softball camp this summer!



CONTACT INFORMATION

Mike Roof
908-377-5784
mroof16@gmail.com

Camp Schedule

9:00-9:30 Attendance/Stretching/Throwing
9:30-10:30 Stations
10:30-11:30 Offensive/Defensive Drills
11:30-11:50 Lunch
11:50-12:30 Competitive Games



**Heights Softball School
for girls entering grades 2-9**

HOURS

Monday June 30-Thursday July 3
9:00 a.m. – 12:30 p.m.

CAMP FEE

- \$150.00 per camper
- Each camper will receive a camp T-shirt
- A non-refundable deposit of \$75.00 must accompany the Registration Form by June 19th with the balance to be paid in full before or upon arrival of the first day of camp.



***All campers should come with glove, bat, slider, high socks, and helmet.**

Registration Form

Please submit this form with a check for the deposit (or total payment) to:
Mountainside Softball Association
253 Central Avenue
Mountainside, NJ 07092

Camper's Name _____

Parent's Name _____

Address _____

Email _____

Home Phone _____

Cell Phone _____

Emergency Contact and Number _____

Grade in September 2014 _____

T-SHIRT SIZE (please circle one)

Youth: S M L XL

Adult: S M L XL

PLEASE NOTIFY CAMP DIRECTOR OF ANY ALLERGIES OR MEDICAL CONDITIONS!

As parent/guardian, I am aware that the sport of softball involves physical contact which could result in injury. Heights Softball School has my permission to provide medical care in the event of injury or illness.

Signature

