



**DiCHIARO**  
Baseball & Softball  
Academy

# Lou DiChiaro's Infield Camp

**Baseball/Softball**

**\$775**

**Program includes 15 Sessions • Saturdays**



Lou DiChiaro - Top Infield  
Instructor in New Jersey

**Grades 4-8 - 9:00am - 10:30am**  
**High School - 10:30am -12pm**

**2017**  
**November 4, 11, 18**  
**December 2, 9, 16, 30**

**Both Groups Combined at the  
Superdome Sports Center - 9am-11am**  
**134 Hopper Ave, Waldwick, NJ**

**2018**  
**January 6\*, 13, 20, 27**  
**February 3, 10, 17, 24**

**\*At DiChiaro Facility. Times to be determined**

**Training includes:** Correct approach to ground balls •  
Proper footwork • Proper throwing mechanics • Work on position  
specifics, double plays, slow rollers, different ground ball angles  
and relays • Two-man drills • Soft hand drills



**\*Registration - Infield Camp**

**Grades 4-8**    **High School**

**\* A 2 Payment plan  
is available**

Player Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone W / H \_\_\_\_\_ Cell \_\_\_\_\_ e-mail: \_\_\_\_\_

Payment Type:  Check (made payable to Dichiaro Baseball & Softball Academy)    Visa\*    MasterCard\*

\*Card Number \_\_\_\_\_ Security Code \_\_\_\_\_ Expiration Date \_\_\_\_\_

Mail to: **Dichiaro Baseball and Softball Academy, 80 Carnot Avenue, Woodcliff Lake NJ 07677**

**Consent and Waiver**

I, individually or on behalf of my child or ward, understand that participating in lessons, camps, team workout or other activities (the programs) offered by Lou DiChiaro's Baseball & Softball Academy, Inc. (the company) entails inherent risks of physical injury, and that my participation or the participation of my child or ward could result in physical injury.

In consideration of my or my child's or ward's participation in any or all of the company's programs, I individually or on behalf of my child or ward, including my or my child's heirs and assigns, release Lou DiChiaro's Baseball & Softball Academy, Inc., its officers, employees, agents, and volunteers, from any and all claims and liabilities arising from participation in the company's programs.

I certify that I am the parent/guardian of \_\_\_\_\_ and that I am over the age of 18.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

**18-01 Pollitt Drive, Fair Lawn, NJ 07410**

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