

Scott Winterburn's  
"All Out Baseball Academy"  
Summer Camp 2010  
Conducted at The University of La Verne

Week 1: Monday, June 21st-----Friday, June 25th  
Week 2: Monday, June 28th-----Friday, July 2nd  
Week 3: Monday, July 5th-----Friday, July 9th  
Week 4: Monday, July 12th-----Friday, July 16<sup>th</sup>

**Location:** University of La Verne home baseball facility, Ben Hines Field at 1950 3rd Street, La Verne, Ca, 91750.

**Directions:** Go East on Arrow Hwy, *North* (left) on D Street, *West* (left) on 3rd Street, *South* (left) on C Street. The *Parking Lot* is located on the corner of C Street and 2nd Street.

**Times:** 8:30am to 3:00pm. Please bring a WATER BOTTLE!

**Ages:** 6-14 years old.

**Space:** We will take 90-100 kids per week, maximum. We anticipate filling spots, so please return your forms as soon as possible to secure a spot. We will call you to confirm information.

**Cost:** \$215 for 1 week            \$410 for 2 weeks  
\$600 for 3 weeks            \$700 for 4 weeks

Please pay with check, money order or cash. Please make payable to *All Out Baseball Academy*, and send to:

All Out Baseball Academy  
C/O Scott Winterburn  
2060 Pinehurst St.  
Glendora, CA, 91741

**Your camper will have a fun week of learning and developing their skills. Instruction comes from people who have coached and played at both the High School and College level!!!**

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**\*\*Please fill out all the information below, cut on the line above and send in!**

Name \_\_\_\_\_ Age \_\_\_\_\_ Shirt Size YM AS AM AL  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email (Important) \_\_\_\_\_ Current Grade \_\_\_\_\_  
League where you will play next season \_\_\_\_\_  
Phone Numbers: Home \_\_\_\_\_ Mom Cell \_\_\_\_\_ Other  
Number(s): \_\_\_\_\_ Dad Cell \_\_\_\_\_

I hereby authorize the director of the All Out Baseball Academy to act for me according to his best judgment in an emergency requiring medical attention. \*Additional Info: Allergies, special considerations, please call Coach Burn @ 626- 926-9655. *Signature of Parent(s) or Guardian(s):* \_\_\_\_\_

**\*\*Please circle which weeks you will be attending: WEEK 1 – 2 – 3 – 4 – ALL**