Dear Prospective Attendee:

Plymouth State University Baseball Program would like to invite you to attend our Baseball Clinic on Sunday January 19th 2014 from 12:00 to 4:00 pm. Throughout the clinic, attendees will be instructed and taught proper technique and given individual advice pertaining to their specific level of play. Hands-on coaching by the Plymouth State University baseball staff, as well as current collegiate players, will provide attendees with a first-hand experience of college coaching styles and methods. Each player will receive a formal evaluation by one of the coaches and will include: MPH reading from position, timed 60 yd dash, fielding and defense technique, swing assessment, catcher pop times, pitching valuation and overall recommendations for improvement.

Players will receive coaching and advice while being analyzed on their swing, batting practice, bullpen session, fielding/defense and throwing ability.

Schedule:

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
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<tbody>
<tr>
<td>11:15-12:00</td>
<td>Registration</td>
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<tr>
<td>12:00-12:30</td>
<td>Introduction and Warm-up</td>
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<tr>
<td>12:30-1:30</td>
<td>Primary Position Instruction</td>
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<tr>
<td>1:30-2:15</td>
<td>Secondary Position Instruction</td>
</tr>
<tr>
<td>2:15-4:00</td>
<td>Bullpens and Batting Practice</td>
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<td>With full evaluations</td>
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</table>

Where: Plymouth State Baseball Fieldhouse: 1 Field House Rd. Plymouth, NH
When: Sunday January 19th at 12:00 Noon
Cost: $75.00 before January 10th, $100.00 after

Please Bring: Indoor shoes/turf shoes, Glove, Batting Glove (catchers gear)

*All other equipment will be provided at the field
*A Plymouth State Athletic Trainer will be present

Please mail the attached form with included method of payment before January 10th to the address listed at the bottom of the page. The cost of attendance is $75.00 if received before January 10th and $100.00 after January 10th.

Sincerely,

Plymouth State University Baseball Program
2014 Plymouth State University Baseball Clinic

Phone: (603) 236-2553  Fax: (603) 535-2777  E-Mail: dcjenkins1@plymouth.edu

Name: ________________________________________________________________
Address: _____________________________________________________________________________________
City: _____________________________ State: ______________________ Zip Code: __________________

Home Phone: ____________________________ E-Mail Address: ____________________

Age: __________________ Date of Birth: __________________ Graduation Year: __________________
Height: __________________ Weight: __________________

First Position: ____________ Second Position: ____________
High School: ______________________________________________________________________________
Town: ______________________________________________________________________________________

High School Coach’s Name _________________________ Phone #: __________________

Latest High School Stats:  Avg: ______ AB: ______ 1B: ______ 2B: ______ 3B: ______ HR: ______

Medical Conditions (allergies, medications, illnesses, injuries, etc.): ________________________________
In case of emergency notify: __________________________________________________________________
Relationship of person to be notified: ________________________________________________________________
Home Phone: __________________ Work Phone: __________________

The above-named camper has my permission to participate in the camp program above.

Signature: __________________________________________ Date: ________________________________

*Mail to: Plymouth State Baseball, PE Center, MSC 32, Plymouth, NH 03264.
*Include Check made payable to Plymouth State University in the amount of $75.00
*For more information please call Associate Head Baseball Coach Clay Jenkins at (603) 236-2553