



Blazers' Elite Pitching Clinic

The Elite Pitching Clinic provides the comprehensive instruction, training and analysis comparable to the training regimen provided to our college pitchers.

Blazers' Elite Pitching Clinic



- 80 minute sessions.
- Instruction in proper throwing mechanics.
- Instruction in proper pitching mechanics.
- Advanced teaching of off-speed pitches.
- Instruction in the proper and safe way to throw curve balls.
- Introduction of various pitching drills.
- Teaching of various pitching grips.
- Instruction in the proper mental approach to pitching.
- Use of training tubes.
- Training in fundamental arm care.
- Hands-on instruction from our staff.
- Catcher provided.
- Classroom instruction.
- Individual film analysis.
- Advanced teaching of off-speed pitches.
- Radar gun feedback.
- Advanced training concepts.

The Blazers' Elite Pitching Clinic is designed to give **collegiate-level instruction** to the high school player looking to truly maximize his performance.

Clinic Date & Time:

Sunday afternoons. January 14th – February 11th

Participants will be informed of their time slot (via e-mail) the Wednesday prior to the first session.

Contact the baseball office for details: 217/641-4306 or wathen@jwcc.edu.

BLAZERS' ELITE PITCHING CLINIC REGISTRATION:

Name: _____ Grade: _____
Street: _____ City: _____
State: _____ Zip: _____ Phone: (_____) _____
Email Address: _____
Parent's Names: _____ Emergency Contact: (_____) _____

CLINIC FEE:

_____ \$ 160

_____ \$ 25

For an additional \$25, the student will be given his final video with voice analysis. The voice analysis provides instruction points of emphasis, so student has reference point for continued development.

Please circle shirt size: S M L XL 2XL

CLINIC RELEASE AGREEMENT:

I hereby authorize the JWCC Blazer Baseball Clinic staff to act accordingly to their best judgment in any medical emergency and I hereby waive and release the said camp, its directors, and John Wood Community College from any and all liability and injuries or illness incurred to my child while attending camp. The cost for treatment of injuries or hospitalization for illness or injuries incurred during the clinic will be the sole responsibility of the parent or guardian of the participant. Any insurance carried by the parent or guardian may be used to defray such medical hospital costs.

Participant's Signature: _____

Date: _____

Parent's Signature: _____

Date: _____

Please note any medical conditions that we should be aware of: _____

Make checks payable and return to:

JWCC Baseball Clinic
C/o Business Office
John Wood Community College
1301 South 48th Street
Quincy, IL 62305

For more information, please call:

217/641-4306

Note: Occasionally, weather will force postponement of the clinic. Notification will be made via e-mail, posting on the JWCC Athletic webpage and on the office voice mail at the number listed above.