

Application

Name

Address

City

Email

Phone

Age

School

Grade Entering

Emer. Phone #

Tee Shirt size XXL XL L M S

Tuition: \$115.00

Send Application and check made payable to:

**Friends of Townie Athletics
C/o Rob Traverse 22Carousel Dr. Riv-
erside, RI. 02915**

**Call (401) 437-2424 for more info.
First Come First Served - Max 70
Campers.**

2010

Friends of Townie Athletics

Softball Camp



Pierce Field

July 26th - July 30th

8:30am - 12:00pm

Dear Parents:

The 2010 Friends of Townie Athletics Softball Camp will be held from Monday, July 26th to Friday, July 30st at the Pierce Field Softball Complex. Players entering 6th grade through high school are welcome.

The mission of the camp is to teach skills, proper techniques, and the correct approach to the game all in a fun-filled atmosphere.

Camp Director: Rob Traverse

- Head Coach: East Providence High School, 1999-Present
 - Record 139-72
 - Division Champs: 2001, 2004, 2005
- Experience (Player)
 - 1983-1985: EPHS Baseball-Captain, All-State 1985
 - 1985-1989: University of Rhode Island Baseball, Captain 1989
- Experience (Coach)
 - Head Coach- East Providence Softball 1999-Present
 - Head Coach- Martin Jr. High Baseball Team 1991-1998
 - Asst. Coach- EPHS Baseball 1990
 - 1990-1995: Providence College Camps
 - 1993: University of Rhode Island Camp

Staff

- **Brian Petsch**- EPHS JV Coach 2003-present
- **Craig Giarusso** -RI Baseball Academy Pitching Instructor
- **Bobby Rodericks** - Coach Riverside Middle School
- **Jenn Dygon**- Former All-State player at EP and Starter at U.R.I
- **Andrea Medeiros**- Assistant Coach Barrington H.S; Former All-State player at EPHS
- **Ashley Stringfellow** - Assistant Coach at East Providence High School

Skills

- Hitting Instruction
- Fielding Instruction
- Pitching Instruction
- Base running Techniques
- Bunting, Slap Hitting
- Proper Throwing Techniques
- Competitions, Prizes and Awards



Please enroll _____

(Camper's name)

The above participant has my permission to participate in the Friends of Townie Athletics Softball Camp. In case of emergency, I understand that every attempt will be made to contact the person(s) listed below:

Name

Phone

Signature:

Date:

Insurance Policy: