

DATES & FEES

ADVANCED HITTING & BASERUNNING

December 26, 2017 Ages: 13-18
Time: Noon-5 p.m. Cost: \$85

YOUTH HITTING & PITCHING

December 27, 2017 Ages: 5-12
Time: Hitting 9-11 a.m. Cost: \$60/session
Pitching Noon-2 p.m.

YOUTH HITTING & DEFENSE

December 28, 2017 Ages: 5-12
Time: Hitting 9-11 a.m. Cost: \$60/session
Pitching Noon-2 p.m.

SUPER SUNDAY HITTING CAMP

February 4, 2018 Ages: 8-18
Time: Hitting 9:30 a.m.-1:30 p.m.
Cost: \$80

SPRING HITTING & PITCHING I

March 4, 2018 Ages: 5-18
Time: Hitting 8:30 a.m. - 10:30 p.m.
Pitching 11 a.m. - 1 p.m.
Cost: \$60/session

SPRING HITTING & PITCHING II

March 11, 2018 Ages: 5-18
Time: Hitting 9 a.m. - Noon
Pitching 1 - 3:30 p.m.
Cost: \$60/session

DISCOUNTS

If participate in:

- 2 clinics, you receive 10% off total
- 3 clinics, you receive 15% off total
- 4-5 clinics, you receive 20% off total
- 6 or more, you receive 25% off total

APPLICATION PROCEDURES

ONLINE REGISTRATION (fee will apply)
available at www.uwoshkoshsportscamps.com.

Mail application to:
UW-Oshkosh Sports Camp
Kolf Sports Center
800 Algoma Boulevard
Oshkosh, WI 54901

If paying by check, make payable to:
UW-Oshkosh Sports Camps and identify
camper's name and name of clinic they will be
attending on the check.

CONTACT

If you have questions about the clinics,
please contact assistant coach Mikole Pierce
at piercem19@uwosh.edu or 920-424-1225.



2017-18 BASEBALL CLINICS

uwoshkoshsportscamps.com

CAMP COACHING STAFF

ABOUT THE CLINICS

REGISTRATION FORM

UW OSHKOSH BASEBALL CLINICS



HEAD COACH KEVIN TOMASIEWICZ

Coach Tomasiewicz enters his fifth season as the head coach of the UW-Oshkosh baseball program. Tomasiewicz owns an 84-77-1 record at the helm of the Titans. He has coached eight players to All-WIAC selections and four players to All-

Midwest Region honors.



ASSISTANT COACH MIKOLE PIERCE

Mikole Pierce enters his second season as hitting coach of the Titans. In 2017, he helped the Titans to a 22-20 record and a second place finish in the WIAC. The Titan offense ranked first in the WIAC in triples (14) and second in

batting average (.286).



ASSISTANT COACH IAN CZARNESKI

Ian Czarneski enters his third season as assistant coach for the Titans. Czarneski's main responsibility within the Titan program is catching and base running. Czarneski has been a part of the Titan program since 2014.



ASSISTANT COACH ROBBIE KLEMAN

Kleman enters his second season as assistant coach for the Titans. He is the Titan's outfield coach. Kleman was an All-WIAC outfielder for the Titans from 2013-16.

*Current UW-Oshkosh baseball players will be in attendance to coach all campers!

ADVANCED HITTING AND BASERUNNING CLINIC

This clinic is for players between the ages of 13-18. The clinic will focus on advanced swing mechanics and baserunning techniques. In this clinic, players learn the proper swing plane and how to sequence their body properly. Players will also learn the fundamentals of baserunning and various stealing techniques.

YOUTH HITTING AND PITCHING CLINIC

This clinic will be based on the basics of hitting and pitching. Players will learn drills that are the foundation of our program. Instructors will stress the importance of sound fundamentals and the proper way to perform our drills. Video analysis will be used to breakdown the mechanics for both hitting and pitching.

YOUTH HITTING AND DEFENSE CLINIC

This clinic will be based on the basics of hitting and defense. Players will learn drills that are the foundation of our program. Instructors will stress the importance of sound fundamentals and the proper way to perform our drills. Video analysis will be used to breakdown the mechanics of the swing.

SUPER SUNDAY HITTING CLINIC

This clinic will be a jump off for the spring season. We will introduce variations on current hitting drills and extensive video analysis throughout the clinic. In addition to offensive drills, we will also incorporate hitter specific strength drills that we use throughout the year. The clinic will be focused on swing mechanics, knowledge of the swing and increasing bat speed.

SPRING HITTING AND PITCHING CLINIC I & II

These clinics will be used for players to prepare and fine-tune their game for their upcoming season. Clinic I will provide a foundation for the players, while Clinic II will have variations in the drills taught in order to further prepare the players. Emphasis will be placed on repeatable mechanics of the swing and increasing bat speed. During the pitching clinic, players will learn proper throwing mechanics. Both clinics will include instant video analysis.

- ADVANCED HITTING & BASERUNNING** | DEC. 26 | \$85
- YOUTH HITTING** | DEC. 27 | \$60
- YOUTH PITCHING** | DEC. 27 | \$60
- YOUTH HITTING** | DEC. 28 | \$60
- YOUTH DEFENSE** | DEC. 28 | \$60
- SUPER SUNDAY HITTING** | FEB. 4 | \$80
- SPRING HITTING I** | MARCH 4 | \$60
- SPRING PITCHING I** | MARCH 4 | \$60
- SPRING HITTING II** | MARCH 11 | \$60
- SPRING PITCHING II** | MARCH 11 | \$60

DISCOUNTS _____ TOTAL AMOUNT DUE _____

Visit uwoshkoshsportscamps.com to register, or fill out the form below. [PLEASE PRINT CLEARLY]

Mail Form to: UW Oshkosh Sports Camps, 800 Algoma Blvd., Oshkosh, WI 54901

Name _____
Last First MI

Address _____

City _____ State _____ Zip _____

Age _____ Gender _____ Grade in Fall '17 _____

Parent or Guardian _____

Email _____

Emergency Contact _____

T-Shirt Size (Circle One) Adult - XL L M S Youth - L M S

Enclosed is \$ _____ as full payment (Checks payable to UW Oshkosh)

Credit Card (circle one): Visa Mastercard Amer Express

Credit Card # _____

Exp. Date _____ ID Code _____

Cardholder's Name (printed) _____

Cardholder's Signature _____

Insurance Company _____

Address _____

Policy Holder _____

Policy Number _____

University of Wisconsin - Oshkosh Hold Harmless/Indemnity and Release
I certify that my son/daughter has been checked by a licensed physician and is physically able to participate in this Sports Camp/Clinic. I agree to allow my son/daughter to be treated by a licensed physician while attending, if necessary, and to assume all costs related to such treatment. I authorize my insurance company to pay benefits. Also, I authorize the disclosure of medical information to my insurance company for the purpose of a claim. I understand that if this application is accepted, there is no refund of the deposit fee a parent or son/daughter should cancel the application later. The undersigned does hereby agree to hold harmless and indemnify the State of Wisconsin, the Board of Regents of the University of Wisconsin System, and the University of Wisconsin - Oshkosh, their officers, agents and employees, from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my son/daughter in the course of the camp/clinic.

Parent/Guardian Signature _____

Parent/Guardian Name (Please Print) _____