



**BILL BETHEA'S ANNUAL
Velocity Program**

**ROTATIONAL STRENGTH
SPEED AND AGILITY
STRENGTH AND CONDITIONING
AGES 8 THROUGH 18**

Velo Program Include:

- Building a pro delivery ● Velocity Drills ● Accuracy Drills ● Different Pitches ● Proper conditioning ● Arm Care
- Speed and Agility ● Improve Body Control
- This is a 1 of a kind event!

SUMMER VELO PROGRAM
ONLY \$200

VELOCITY CAMP TRAINERS

Bill Bethea – Owner of PPH Baseball, former Pro Pitcher, Former Scout, Published Author with over 25000 hours of experience training pitchers. Founder of www.billbethea.com

Kyle Kennett – Current professional player, former Rider U standout, Played professionally in Europe. Kyle has used this program when prepping for his pro season

Joe Jensen – 2015 #6 Northeast Top MLB prospect, works with our athletes on speed, explosion, and strength. Current professional player

Dates and Location

Velocity and Conditioning Program

Dates: July 24th – July 27th
(9am to 3pm)

Each player will get video analysis, individualized attention and a plan to advance and enhance their game!

Location: Pecci Fields and Indoor

Please send check or money order, payable to POWER PITCHING & HITTING for amount of camp/ camps selected, with completed enrollment form, to us at: PPH Baseball, PO BOX 241, Plainsboro NJ 08536

(732) 586-1309 www.pphbaseball.com
Register online

Player's First Name	_____	Last Name	_____
Street Address	_____	City, State, Zip	_____
Player's Age	_____	Phone	() _____
Mother's Name	_____	Father's Name	_____
Emergency Contact	_____	Relationship	_____
Emergency Phone	_____	Email Address	_____

Does the player have any medical condition that would preclude/restrict participation in the clinic?
 YES NO If YES, please explain.

Waiver: I the undersigned, as a parent or guardian of the named applicant for entry into the clinic activities offered at West Windsor Community Park and adjacent fields do hereby give permission and approval for the applicant's participation in Instructional Classes offered by Power Pitching & Hitting Professional Baseball Instruction, Inc. I further agree to assume all risks and hazards incidental to such participation, and I do hereby waive, release and absolve the organizers, sponsors, directors, managers, coaches, instructors, and participants from any claim arising out of injury to the applicant, my son/ daughter/ ward.

Medical: I give my consent for any emergency medical/ surgical treatment to be given to my child. This treatment pertains to life threatening situations or any other medical emergencies such as fracture or suturing. I give my consent for the emergency to treat my child. This does not apply to elective surgery.

Signature of Parent

Date

