



## Creeks Baseball Club Summer Camp 2015 Presented by Luke Marabell

### Camp Overview

The Creeks Baseball Club Camp is designed to help you whether you're just a beginner in t-ball or a Travel baseball stand out, this camp is designed to teach the younger and older players the basic skills of the game and enhance the skills they've already obtained. This camp will provide quality instruction to all levels. We aim to make sure the kids have a great time playing the game they love through drill work, competitions, and games. This camp provides instruction in all aspects of the game including hitting, defense, base running, throwing, basic skills, and more!

### Coaching Staff

Luke Marabell is in his 7th year as Head Coach of the Creekside High School Baseball team. He graduated from Jacksonville University where he played baseball from 1993-1995. While playing for Dolphins he made 2 NCAA Regional appearances and won a Sunbelt championship. Our baseball camp is led by a team of expert Coaches and Collegiate players. Our staff will insure your athlete will receive position-specific training and development through drills, practice sessions and situational game play. This Baseball Camp is not affiliated or associated with Creekside High School.

### Dates and Times

June 8-11 (Mon-Thurs)  
9:00 a.m. ~ 12:00 p.m.

### Cost

\$130 and includes a  
free t-shirt!

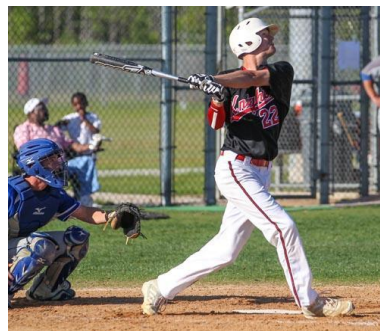
### Age

All kids (Girls & Boys)  
from ages 6 to 15 and all levels.







### Location

**River Town Fields**

For more information, contact  
Luke Marabell at:  
lmarabell11@gmail.com or  
904-868-8682



Every Camper can expect  
interactive fun and instruction  
from a highly knowledgeable  
Camp staff

-  Proper Infield and Outfield techniques
-  Proper Catching and Pitching Techniques
-  Proper Throwing techniques
-  Proper Base running techniques
-  Proper Hitting techniques
-  Skill related competitions

### Equipment Needed

Players should bring plenty of baseball clothing to last for the duration of camp and all necessary baseball equipment: cleats, hat, bat, glove, catching gear (if applicable), batting helmet, etc. The Marabell Baseball Camp will provide all balls and necessary drill equipment.

**Optional \$ for drinks (snacks).**

## Registration

Send completed form below, waiver and release, and send a \$130 payment to:

Checks Payable to: Marabell Baseball Camp

c/o Luke Marabell  
105 Merkland Ct.  
St. Johns, FL 32259

Please ask about sibling discounts also!

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

Parent(s) Name/Legal Guardian: \_\_\_\_\_

Email: \_\_\_\_\_

Grade (Fall 2016): \_\_\_\_\_

Years of Baseball Experience: \_\_\_\_\_

Medical Insurance Company: \_\_\_\_\_

Policy #: \_\_\_\_\_

Family MD & Phone Number: \_\_\_\_\_

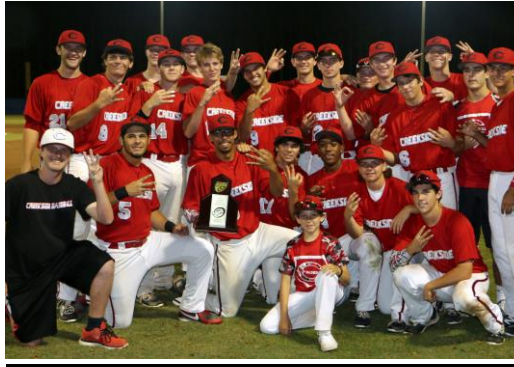
Does this Player have any physical  
limitations/injuries?

Yes \_\_\_\_ No \_\_\_\_ Specify: \_\_\_\_\_

T-Shirt Size (circle)

Youth	S	M	L	XL
Adult	S	M	L	XL

# CBC/Marabell Baseball Skills Camp



2009 District Runner Up  
2012 District Runner Up  
2013 5A District Champions  
2014 6A District Champions  
2015 6A District Champions  
2013 5A Regional Champions  
2014 6A Regional Champions  
2013/2014 Final Four



## Waiver and Release

I (we) the parent(s) of \_\_\_\_\_,  
Consent to have the CBC/Luke Marabell Camp administrators and coaches act on our behalf should an emergency situation arise, and I (we) grant them permission to authorize medical attention recommended by the physician or hospital. I (we) accept full responsibility for expenses incurred in any diagnosis or treatment of any accident, injury or illness. It is understood that this authorization is given in advance of any specific authority and power to render care which the aforementioned physician, in the exercise of his or her best judgment, may deem advisable. It is understood that efforts shall be made to contact me (us) in rendering treatment to my (our) daughter, but that any of the treatment will not be withheld if I (we) cannot be reached. This authorization is valid for treatment of emergencies when I (we) am not available to give consent.

I (we) certify that my (our) child \_\_\_\_\_, is covered by a medical insurance policy and therefore, will be covered in case of any injury incurred while participating in the baseball camp.

\_\_\_\_\_  
Signature of Parent(s) or Legal Guardian(s)

Sworn and ascribed before me on this  
\_\_\_\_\_ Day of \_\_\_\_\_ in the Year \_\_\_\_\_.

