



UW-La Crosse Baseball

Fall Instructional Leagues



September 8, 15, 22, 29, Oct 6 (rain date Oct 13)

The coaching staff and players with UWL Baseball invite you to participate in our 10th year of successful fall baseball! We will be offering our traditional leagues for 5-6th grades, 7-8th grades, and 9-12th grades. The great success of our UWL Baseball Fall League starts with the direct interaction with our players for both instruction and game-play, while being directed by our coaching staff. Our fall league is unique in that each game-day also comes with about an hour of instruction before each game, and we put an emphasis on instruction during games.

High School Instructional League

Grades 9-12
 Copeland Park & UWL Campus Field
 Cost - \$195
 Assign players from same school, to same team
 Regulation bases (90') and mound (60'6")
 6-7 inning games, with time limits
 3 sessions: 10:15am – 1:25pm
 12:35pm – 3:55pm
 3:05pm – 6:25pm

Middle School Instructional League

Two divisions: Grades 5-6 & 7-8
 Shelby Fields (Hillview)
 Cost - \$170
 Can request teammates
 5-6th grade – 75' bases & 50' mound
 7-8th grade – 80' bases & 55' mound
 5 inning games, with time limits
 3 sessions: 10:00am – 1:05pm
 12:30pm – 3:35pm
 3:15pm – 6:20pm

Session times will rotate, and are assigned as part of the master schedule - Individuals do not register by session

Typical Session Format

Active Warm-up	5-10 min
Throwing Progression	5-10 min
Instructional Work	45-55 min
5/7 inn Game	1.5-2hrs

Each player registers as an individual, and teams are formed based on school and requested teammates
 Assigned teams will have no more than 12 Players
 Local umpires will work each game

Participants will play one game each Sunday, as well as the approximate 1 hour of practice and instruction before each game. Depending on total teams, each team may play a double-header once.

Earlier registration due date this year – register through August 25

Team rosters, and game & practice schedules, will be emailed no later than Aug 30
 Please be sure to provide a valid email address and print clearly & check junk/spam folders
 Rosters and Schedules will also be posted online at: www.baseball.uwlcamps.com

Reduced price for catchers - \$170 for high school & \$145 for middle school
Will be assigned as primary catcher for team & asked to catch a most of the time

Family discounts are available for multiple siblings (*mail-in registration only*)

Registration available online at: www.baseball.uwlcamps.com OR by filling out the paper registration and mailing in/drop-off
Registration is available through August 25 or until spots are filled



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REGISTRATION FORM

First Player's Name _____ School _____ Grade _____

League Registering for (circle): 5-6th 7-8th 9-12th T-Shirt size (circle): YS YM YL YXL S M L XL

Primary Position (circle one): P C 1B IF OF Do you Pitch? YES NO Do you Catch? YES NO

Requested Teammate(s) _____

Second Player's Name _____ School _____ Grade _____

League Registering for (circle): 5-6th 7-8th 9-12th T-Shirt size (circle): YS YM YL YXL S M L XL

Primary Position (circle one): P C 1B IF OF Do you Pitch? YES NO Do you Catch? YES NO

Requested Teammate(s) _____

Address _____ City _____ State _____ Zip _____

Emergency Contact _____ Emergency Contact Phone _____

Primary Email Address (necessary for confirmation & league communication) _____

Amount Enclosed: \$ _____

Check enclosed, made payable to: **UW-La Crosse**

Return to:

UW-La Crosse Athletic Camps & Clinics

157 Mitchell Hall

1725 State St.

La Crosse, WI 54601

If you have any questions, please contact the UWL Camps & Clinics Office by e-mail at: athleticcamps@uwlax.edu

WAIVER: Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. By signing this form I agree to hold harmless and indemnify UW-La Crosse, 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 dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if I cannot be reached in the event of an emergency.

Parent/Guardian Signature: _____ Date: _____

visit uwlacamps.com for online registration and more information!