



Hitting Clinic

Active Alumni

2 – Professional
8 – Collegiate

Jason Patton ('05)

Frontier League – St. Louis

Drafted '09 - Tampa Bay Rays

Josh Stewart ('07)

Austria Baseball League (ABL)
Kufstien Knights

Aaron Thompkins ('07)

Sr. 1B
Furman Univ. (SC)

Jared Messer ('09)

Soph. P/3B
Malone University

Chris Thomas ('10)

Fr. P
Heidelberg Univ.

Cole Tilton ('10)

Fr. OF
Kent State Univ.

Robbie Purdy ('10)

Fr. 3B/OF
Heidelberg Univ.

Ethan Reese ('10)

Fr. 2B
Ashland Univ.

Andrew Murdock ('10)

Fr. OF
Notre Dame College (OH)

AJ Kile ('10)

Fr. OF
Notre Dame College (OH)

The 2010 Perry Panther Hitting Camp is built to introduce the player to our offensive philosophy through various hitting drills under the experienced eye of our varsity players and coaches. The camp will concentrate on hitting drills that you can replicate throughout the year. We will work through *Progression Hitting Drills* emphasizing balance and hand/eye coordination. This will allow the athlete to learn new drills, which train muscle memory and proper hitting technique.

At Perry we incorporate "small ball" into everyday drills and we will continue that tradition with proper bunting techniques for sacrifices, squeezes, as well as bunting for a hit. Our future Panthers will work on the same drills that our varsity players work everyday to build a strong foundation for short-term and long-term offensive success.

When:

January 23rd, 2010

Ages 7-10 @ 1-3:30pm

Ages 11-14 @ 4-6:30pm

Where:

Perry High School Main/Auxiliary Gym

What to bring:

Bat and Gym Shoes

Registration Deadline: January 17th

Cost: \$25/player \$40 for 2 children \$60 for 3 children \$75 for 4 children
Coaches and Adults: Free Admission

Checks payable to: *Perry Bullpen*
Questions Contact: Coach Matt Miller 330-268-9401
millerm@perrylocal.org

Perry Hitting Clinic
Attn: Matt Miller
5952 Perry Hills Dr. SW
Canton, OH 44706

(Deadline Jan. 17th 2010)

Return/Mail this portion with a check to the above contact

Name	Age	Gender M / F	Summer Team / Sponsor
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Parent Name and Phone # _____

Address: _____

Emergency Contact and Phone #: _____

Email: _____