Release for Medical Treatment

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

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List any conditions that physicians should be aware of:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I hereby authorize any medical treatment, which may be advised or recommended by a physician. Also, I waive and release the camp staff, North Davidson Administration, and the Davidson County School System from all rights and claims for damages, injuries, or loss to person or property which may be sustained during participation in camp.

Parent or Guardian Signature:  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_“It’s a beautiful day. Let’s play ball!”



29th Annual

No Excuses Baseball Camp at ND



Of Welcome Supports

The Knights2024 No Excuses

Baseball Camp at

North Davidson



Camp Dates

June 17-20

Ages 7 – 15

9am-12 noon

Monday – Thursday

No Excuses

Baseball Camp

The Black Knight’s Baseball Staff is excited about the camp for this year. This is our 29th year working with our young players and each year gets more gratifying.

We will emphasize fundamentals, skill development, team play and most of all fun! Come learn the game with one of the finest camp staffs around.

Sign up now and reserve your spot.



Camp Information

Date: June 17 – 20

Time: 9am – 12 noon

Location: North Davidson

Baseball Field

Cost: $100.00

Ages: 7 – 15

Staff: Matt Griffin – Head Coach,

North coaching staff,

current and former North

players and area coaches.

Extras: Each camper will receive

a T-Shirt and snack

Registration: 8:00 am June 17 or

Pre-register by mail

Questions: Matt Griffin

336-972-8027

mgriffin1@davidson.k12.nc.us

Registration Form

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

Age: \_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Check Payable to: Black Knights**

**Baseball Camp**

Mail to: Matt Griffin

4226 Frye Bridge Rd.

Clemmons, NC 27012

T-Shirt Size:

Adult S \_\_ Youth S \_\_

Adult M \_\_ Youth M \_\_

Adult L \_\_ Youth L \_\_

Adult XL \_\_