

**There is a limit on the number of players in this camp. Sign Up Now!**  
Any Questions: call 570 – 955 – 0471 or visit  
[www.electriccitybaseball.com](http://www.electriccitybaseball.com)



- Campers, ages 6 through 18, will receive instruction (both group and individual) which will cover all aspects of softball pitching.
- Each camper will receive a written analysis of performance and ability including strengths and weaknesses.
- Each camper must bring a glove and sneakers/turf shoes.
- **The total cost of the camp is \$100.**
- You will be notified by email once your application has been received and processed.

There are no refunds. For more information concerning our refund policy, please visit  
[www.electriccitybaseball.com](http://www.electriccitybaseball.com).

**Checks are made payable to: ECBSA, LLC**  
**Mail to: ECBSA, LLC**  
**501 Wyoming Ave., Scranton, PA 18509.**

**Deadline for camp applications is:**  
**February 1, 2019**

### **WHAT CAMPERS & PARENTS SAY**

“All of the camps Electric City conducts are informative, instructional and thorough. My child will be at almost everything they do.”  
-Joe Mascaro, parent

“I really enjoyed myself. I learned a lot and the coaches were great!”  
-Ashley Brown, camper

“ECBSA is really the best around. They have patience and take a great deal of time to teach the girls the softball game the right way.”  
-Deborah Luchinski, parent

“This softball camp is my favorite. I wait every year for this!”  
-Abby Nealon, camper

**ECBSA, LLC**  
**501 Wyoming Ave.**  
**Scranton, PA 18509**  
**U.S.A.**

## **ELECTRIC CITY** **BASEBALL & SOFTBALL** **ACADEMY**

**PRESENTS THE**

### **Karissa Worobey** **Softball Pitching Camp**



**February 2, 9, 16 & 23, 2019**  
**10:30am – 12:00pm**

**[WWW.ELECTRICCITYBASEBALL.COM](http://WWW.ELECTRICCITYBASEBALL.COM)**

**Camp Director: Karissa Worobey**  
**Softball Pitching Instructor**  
**Electric City Baseball**  
**& Softball Academy**

- Four year letterwinner at Scranton High School
- Assistant Coach, Scranton High School
- Four year letterwinner at Keystone College
- All-Time Strikeout Leader, Keystone College (2015)

Coach Worobey will be assisted by other softball pitching coaches.

Sample Daily Camp Schedule

- 10:30am Roll & Introduction
- 10:35am Stretching & Warm-up
- 10:45am Throwing Program
- 11:00am Brief Talk – Daily Topic
- 11:15am Drill Sequences
- 11:35am Bullpens
- 11:55am Wrap-up & Review



**Electric City Baseball & Softball Academy**  
**501 Wyoming Avenue**  
**Scranton, PA 18509**  
**Phone: 570-955-0471**  
**Fax: 570-955-0768**

**Book your try-outs or practices now at the Electric City Baseball & Softball Academy's facility! Check our website for private lesson and camp information.**

**Our Facility Includes**

- ❖ Fully turfed 7,000 square foot practice area
- ❖ Six batting cages (cages can be retracted for defensive work)
- ❖ Soft Toss & tee drill area
- ❖ ATEC armed pitching machines (throws real baseballs up to 90mph)
- ❖ Softball pitching machine
- ❖ Portable baseball & softball mounds
- ❖ Pro Shop (with baseball equipment & apparel)
- ❖ Parents waiting area
- ❖ Film Room
- ❖ Players Lounge

**Individual Cage Rentals**

- ❖ Half Hour Session
- ❖ Full Hour Session
- ❖ Full facility or team pricing: *please call for quote*

**Top Notch Staff of Instructors**

- ❖ All instructors have college and/or professional coaching experience
- ❖ Please see our web-site for updated biographies
- ❖ Packages available for multiple lessons and workouts

Karissa Worobey Softball Pitching Camp Application – Return with payment by deadline: 2/1/19

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ D.O.B. \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Bats: L / R / S Throws: L / R Primary Fielding Position: \_\_\_\_\_ Secondary: \_\_\_\_\_ Total Price:  \$100.00  
 Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy Number: \_\_\_\_\_

*I do hereby voluntarily consent to examination and emergency service treatment, including the administration of such drugs, infusion and/or transfusion of blood components deemed necessary in the judgment of the physician(s) and whoever may be delegated as assistants of the medical staff or nearby hospital. I certify that I have read and fully understand the consent given herein. I also certify that no guarantee or assurance has been made as to the results that may be obtained. I also agree not to sue Electric City Baseball & Softball Academy. The undersigned intends to be legally bound hereby.*

Disabilities or Limitations \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_ Relationship \_\_\_\_\_

Your email address (required for confirmation): \_\_\_\_\_