



BNSSPORTS.US/BALLWIN

636.394.2255

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\$400

PITCHING 360

BUILD CORE STRENGTH

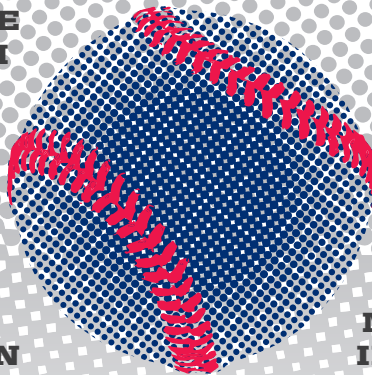
MECHANICS OF PITCHING

BUILD ARM/SHOULDER STRENGTH

EFFECTIVE BULLPEN SESSIONS

INJURY PREVENTION

MENTALITY IN PITCHING



INCREASE VELOCITY

DAY	DATES								TIME
Monday	11-30	12-7	12-14	1-4	1-11	1-18	1-25	2-1	8:00-9:00 PM
Thursday	12-3	12-10	12-17	1-7	1-14	1-21	1-28	2-4	8:30-9:30 PM
Saturday	12-5	12-12	12-19	1-9	1-16	1-23	1-30	2-6	11:00 AM-12:00 PM
Sunday	12-6	12-13	12-20	1-10	1-17	1-24	1-31	2-7	12:00-1:00 PM 11:00 AM-12:00 PM

The Program

Having a healthy, strong pitching arm is the name of the game when it comes to your time on the mound. After seeing an upward trend in arm injuries in high school players the past few years, Balls-n-Strikes Ballwin has uniquely rejuvenated the High School pitching program and how we approach conditioning arms in the

offseason. Two things stand out to us within this process: mechanics and strength. This program is centered around implementing correct mechanics that reduce the chances of an arm injury. In result, this makes a more efficient throw that involves the whole body. The strength portion involves conditioning the

core muscles with a proven medicine ball routine and providing an introduction to other arm strengthening techniques, such as band routines, shoulder tube routines, and weighted ball routines. The goal of this pitching program is to build a healthy foundation for the grind of the upcoming high school season.

HIGH SCHOOL PITCHING 360

Send completed form with check or credit card info to:
Balls-n-Strikes Ballwin, 203 B Ramsey Lane, Ballwin, MO 63021

Name _____ Birthdate ____/____/____

Address _____

City _____ State _____ Zip _____

Phone H _____ Phone W _____

Phone C _____ Email _____

Parent/Guardian Name & Signature _____

I hereby authorize the director of the Balls-n-Strikes camp to act for me according to his/her best judgment in an emergency requiring medical attention. I know of no mental or physical problems, which might affect my child's ability to safely participate in this camp. I will be responsible for any medical or any other charges in connection with his attendance at camp. I agree to abide by the rules and regulations of the camp.

Credit Card # (MC, VISA, Discover) _____ Exp ____/____

Credit Card Signature _____ 3 Digit Code _____ Group Me With: _____

Day: Monday Thursday Saturday Sunday

Sunday times: 11-12 PM 12-1 PM