



**WLADYKA  
BASEBALL**



# FALL TALENT SHOWCASE

## AN OPPORTUNITY FOR SELECT PLAYERS TO SHOWCASE THEIR SKILLS BEFORE COLLEGE COACHES AND PROFESSIONAL SCOUTS

**DATES: SATURDAY AND SUNDAY, OCTOBER 15 and 16  
10 AM TO 3 PM**

**AT ST. JOSEPH HIGH SCHOOL  
METUCHEN, NJ**

**CALL (201) 935-3917**

### HERE'S WHAT TAKES PLACE

The Fall Talent Showcase is an exposure aid intended to enhance a prospect's opportunity to play college and/or professional baseball. It provides visibility for quality players by enabling them to demonstrate their abilities before coaches and scouts who can make realistic, first hand assessments. The program format calls for a combination of skills testing and games over the two day period designed to maximize exposure.

#### ON DAY 1...

All position players will be timed in the 60 yard dash and have their arm strength/accuracy tested. Catchers will have their receiving and blocking skills judged as well as their times to second base. Pitchers will throw 8-10 pitches on the speed gun and have their delivery evaluated. General infield/outfield workouts will be conducted to demonstrate mechanics, range/angles, first step quickness/jumps, double play feeds and pivots, relays, etc. All players will have their hitting ability determined by live batting practice.

#### ON DAY 2...

Players will be organized into teams and games will be played. The games will be structured, controlled ones to provide equal opportunity and to see players perform in certain situations. A specific number of hitters will bat each inning to guarantee equal exposure opportunities for all participants. Attempts will be made to maximize the game action by creating base stealing and running situations.

All coaches and scouts in attendance will be provided with player profiles on all participants detailing personal and academic information. Additionally, 60 yard dash times and velocity readings will be posted.

### WHO CAN ATTEND

The showcase is an attempt to bring together the better high school players in the Mid-Atlantic/New England region. Only players like yourself who receive invitations or are recommended by coaches and scouts will be participating. Understanding that every player is not a professional prospect or Division I recruit, the program is not restricted to blue-chip athletes. However it is directed toward legitimate prospects who have a reasonable chance of benefitting from it. College coaches from all levels will be present matching their personnel needs with players' abilities.

### FACILITIES

Located in Middlesex County New Jersey, St. Joseph H.S. provides the top notch facilities necessary to conduct a quality showcase.

- 3 Full Size Baseball Diamonds
- Additional Baseball Areas for Infield/Outfield Workouts and Drills
- 3 Batting Cages

### HOTEL INFORMATION

Arrangements have been made with the Holiday Inn of South Plainfield to accommodate campers. Special rates of \$89 per night have been offered with the cost divided by the number of players sharing the room. **The camp will provide transportation to and from the field daily. Complete hotel information will be sent upon request.**

### REGISTRATION FORM

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Sept 2011 Grade: \_\_\_\_\_

E-mail: (print clearly) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Position: 1) \_\_\_\_\_ 2) \_\_\_\_\_

Bat:  R  L Throw:  R  L

High School: \_\_\_\_\_

PSAT Score: \_\_\_\_\_ SAT Score: \_\_\_\_\_ ACT Score: \_\_\_\_\_  
(If Taken) (If Taken) (If Taken)

Class Rank: \_\_\_\_\_ / \_\_\_\_\_ Grade Point Avg.: \_\_\_\_\_

Hotel Information:  Yes  No

**TOTAL TUITION**  **\$350.00** A \$150.00 deposit must accompany this application with the balance to be paid prior to the start of camp.

Make Check Payable to:

**Joe Wladyka's Camps**

**7 Wilson Avenue, Rutherford, N.J. 07070**

I certify that my child is in good physical condition and can partake in the daily schedule of events. In case of emergency, I grant permission for my child to be given treatment at a local hospital.

\_\_\_\_\_  
(Signature of Parent or Guardian)

**FOR FURTHER INFORMATION CALL (201) 935-3917.  
DIRECTIONS WILL BE SENT TO THOSE WHO REGISTER.  
YOUR REGISTRATION WILL BE CONFIRMED BY MAIL.**

**www.wladykabaseball.com**