



Nick Ozuna's Cardinal Baseball Summer Camp 2026

Dear Prospective and Future High School Baseball Players:

As Head Coach of the Bellaire High School Baseball Program, I am personally inviting you to attend my “Cardinal Baseball Summer Camp 2026.” This is a can’t miss camp that teaches the fundamentals and skills necessary to play and practice like a champion. We will cover baserunning, offense, defense, pitching, catching, and play a scrimmage game on the final day of camp.

This camp will afford me the opportunity to get to know and see all incoming freshman baseball players as well as to allow future prospective, younger players the opportunity to become familiar with and how to play “The Cardinal Way.” Members of my coaching staff and I along with former Cardinals, and other local High School coaches will be available to all campers. I encourage all prospective players to attend if possible.

This year the camp will be held Monday, June 08, 2026 – Wednesday, June 10, 2026, from 9 am until 11:30 am. Camp will be held at Rocky P. Manuel Field (6300 Ave B at Bissonnet, Bellaire, TX 77401). The camp fee will be \$175, for ages 8 – 14, (includes camp shirt). Incoming freshman will receive a separate email about practice gear that needs to be purchased prior to camp.

Payments and reservations are due by Monday, June 1, 2026. Enrollment will be limited, and “walk-ups” will be accommodated on a first come first serve basis only if space is available. Please complete the attached enrollment form and waiver, and email or mail it with payment to the address provided as soon as possible to guarantee enrollment. You can also **email the forms to coachoziii@yahoo.com** and pay electronically with Venmo, Zelle, or Paypal.

We pride ourselves in our baseball program being one of the finest in the nation, and I look forward to your participation.

Sincerely,

A handwritten signature in black ink that reads "Nick Ozuna III".

Nick Ozuna III
Head Coach, Bellaire Baseball



2026 Nick Ozuna's Cardinal Baseball Summer Camp

“A Winning Tradition”

MEET HEAD COACH NICK OZUNA III

(178-91-7) Overall Record

2021 HISD District 18-6A Coach of the Year

2018 HISD District 18-6A Coach of the Year

24 years of High School Baseball Coaching experience

1994 BHS Graduate and member of State Championship Team

Former D1 Baseball Player (Sam Houston State 1995-97)

2000 BHS Baseball Hall of Fame Inductee

Over 160 former Ozuna coached players have played at collegiate level

14 former players have played professional baseball

2 former players have played in MLB

2026 CAMP SCHEDULE

MONDAY – FUNDAMENTALS OF DEFENSE / POSITION SKILLS

TUESDAY –OFFENSE/BASERUNNING

WEDNESDAY – TEAM DEFENSE / SCRIMMAGE GAME

ALL CAMPERS MUST BRING THEIR OWN WATER AND SNACKS

Bring your own cap, glove(s), bat, and any other gear. Catchers should bring their own equipment. Players can wear shorts or baseball pants.

On the final day of camp, campers are encouraged to wear pants for the scrimmage/game.

2026 Cardinal Baseball Summer Camp Application

June 08, 2026 – June 10, 2026 9:00am – 11:30am

PLEASE COMPLETE THE FOLLOWING APPLICATION AND RETURN WITH PAYMENT TO ADDRESS PROVIDED BELOW; YOU MAY ALSO **EMAIL APPLICATION & WAIVER TO COACHOZIII@YAHOO.COM** AND PAY BY VENMO, ZELLE, OR PAYPAL

PLAYER NAME _____ DOB _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____ EMAIL _____

GRADE COMPLETED _____ AGE _____ SCHOOL _____

LEAGUE PLAYED IN _____ POSITION _____ T-SHIRT SIZE _____

PARENT'S PERMISSION:

I hereby authorize Nick Ozuna's Cardinal Baseball Camp to act on my behalf according to their best judgment in any emergency requiring medical care and or treatment. I hereby waive and release the Cardinal Baseball Camp, Coach Ozuna, Bellaire High School or HISD, from any and all liability in this regard and in regard to any other injury. Nick Ozuna's Cardinal Baseball Camp is not affiliated with Bellaire High School or the HISD and is a privately run camp. I know of no mental or physical problems which may affect my child's ability to safely participate in the camp. I realize that I, or my own insurance carrier, will be responsible for any medical care that may be necessary.

PARENT OR GUARDIAN NAME: _____

EMERGENCY PHONE: _____

SELECT BOX FOR FEE AND PAYMENT

\$175 CAMPERS 8Y – 14Y

\$175 IN-COMING BHS PLAYERS

TOTAL AMOUNT DUE: \$ _____

PAYMENT BY PAYPAL, ZELLE, VENMO, OR PERSONAL CHECK (PAYABLE TO NICK OZUNA)

PayPal: Coachoziii@yahoo.com

Venmo: @Nick-ozuna-1

Zelle: Coachoziii@yahoo.com

MAIL THIS APPLICATION AND WAIVER BELOW, AND IF PAYING BY CHECK TO:

**Nick Ozuna III
7122 MOBUD DR. HOUSTON, TX 77074**

CARDINAL BASEBALL SUMMER CAMP

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

_____ (participant) has elected to take part in Nick Ozuna's Cardinal Baseball Summer Camp. In consideration for and as a condition of such participation, participant and Parents/Guardians agree to assume all risks involved with participation in Nick Ozuna's Cardinal Baseball Summer Camp and agree to hold Nick Ozuna's Cardinal Baseball Summer Camp, its coaches, advisors, volunteers, Bellaire High School and Houston ISD, harmless from all suits, claims, or demands of every kind and character arising out of or in connection with the undersigned as a participant in said programs. Participant and Parents/Guardians further releases Nick Ozuna's Cardinal Baseball Summer Camp its coaches, advisors, volunteers, Bellaire High School and Houston ISD from all suits, claims, or demands of every kind and character which participant or participant's successors or assignees shall or may have arising out of or by reason of or in connection with the course of instruction and activities of the programs. It is understood that participation in these activities could result in serious injury and/or death. It is declared that said participant is physically fit to participate and is in good physical condition.

In consideration of being allowed to participate on behalf of Nick Ozuna's Cardinal Baseball Summer Camp program and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS (insert name of sports organization) their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT

Date: _____ Player Name: _____ Signature: _____

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Date: _____
Name of parent/guardian: _____ Parent guardian/signature: _____

Subscribed and sworn before me this _____ day of _____, 20____

NOTARY SIGNATURE

