

# **PLAY LIKE A GIRL!**

## **Become the girl pitchers are afraid to pitch to Conestoga High School Girls Softball Clinic**

Sunday, April 12th

12:00 -1:30 Coach Pitch

2:00 -3:00 Minors, Majors & Juniors

At the Conestoga High School Gym



**\$25.00 per player or \$40.00 for two players with mail in registration—\$30.00 per player or \$50.00 for two player at the door**

**Don't forget a water bottle, your glove & helmet and wear sneakers!**

### **Registration Form**

Please make checks payable to **Conestoga Softball Booster Club** & remit with completed registration form to **Kerry Kostenbauder, 409 Daventry Rd. Devon, Pa. 19333**

**Player's Name:**

**Date of Birth:**

**Address:**

**Home Phone:**

**Parent's Name:**

**Parent's Cell:**

**Email (1):**

**Parent's Cell:**

**Email (2):**

**Little League Name/League Org:**

**Circle Level:** Coach Pitch    Minors    Majors/Juniors

#### **Release:**

(Player's Name) \_\_\_\_\_, is permitted to participate as a player in the Conestoga High School's Girls Softball Clinic, hosted by the Conestoga Girls Softball Team. I do understand that any other personnel involved with this program are not responsible for any injuries or accidents that may occur before, during or after any activities associated with the clinic.

I hereby give permission for my child to engage in the softball clinic hosted by the Conestoga High School's Girls Softball Team. In the event my child is injured and I cannot be reached to make emergency medical arrangements or circumstances make it impossible for me to be reached, I hereby authorize the participating coaches to contact emergency medical personnel. I covenant and agree, that for and in consideration of my child's participation in such activities to indemnify and hold harmless the Conestoga Girls Softball Team, its players, coaches, parents and volunteers assisting in these activities, from any and all damages, claims or liability of any kind, whatsoever, by reason of injury to property or third person occasioned by any error, omission or negligent act of my child. I further do hereby expressly release, discharge and hold harmless the Conestoga Girls Softball Team, its players, coaches, parents, and volunteers assisting in these activities, from any and all damages, claims, or liability of any kind, whatsoever, from any injury or death to my child or damages to property, arising or resulting from my child participation in these activities.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In case of emergency, contact: \_\_\_\_\_ Phone: \_\_\_\_\_