

# SOFTBALL CLINIC

for all community softball players

**Conestoga High School Girls Softball**  
**SUNDAY, MARCH 25, 2012**

**@CHS Gym**



**Bring your  
softball glove  
And wear your  
sneakers!**

*Thank  
you!*



**Times for each age group...**

- 12:00 – 1:30 pm Coach Pitch
- 1:45 – 3:15 pm Minors
- 3:30 – 5:00 pm Majors/Jrs

- ✓ Please send completed registration form and payment to Helaine Leibowitz
- ✓ We do allow "WALK-IN" registrations but so prefer that you pre-register, by March 21, 2012 – thank you!
- ✓ Cost is \$20 per player or \$35 for two players from same family.
- ✓ Report to the GYM at Conestoga High School 15 minutes prior to your start time, wear sneakers, bring mitt.

## March 25, 2012, Softball Clinic Registration Form

Please send payment and completed registration form to **Helaine Leibowitz, 1015 S Wisteria Drive, Malvern, PA 19355**.  
 Please make checks payable to "Conestoga Softball Booster Club."

Player Name:	Date of Birth:
Address:	Home Phone:
Parent Name:	Parent Cell:
Print Email clearly:	
Coach's Name/Little League Org	Circle Level:    Coach Pitch    Minors    Majors/Jrs

**Release:**

My daughter, \_\_\_\_\_, is permitted to participate as a player in the girl's softball clinic provided by the Conestoga High School Girl's 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 girl's softball clinic provided by the Conestoga High School Girl's Softball Team. In the event my child is injured and I cannot be reached to make emergency medical arrangements or circumstances make it impracticable 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 Girl's 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 persons occasioned by any error, omission or negligent act of my child. I further do hereby expressly release, discharge and hold harmless the Conestoga Girl's 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 damage to property, arising or resulting from my child's participation in these activities.

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

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