



2019 HITTING CLINIC

Clackamas County Girls Softball Association (CCGSA)
HITTING CLINIC REGISTRATION FORM

Free Hitting Clinic!

We do ask that you make \$5 per clinic donation (\$20 for the 4 weeks) to CCGSA. This will be used for North Clackamas Park field rental for batting practices later this season.

Knock the dust off your swing, get ready for the 2018 season!

Sam Frost, Varsity Coach, and the Rex Putnam Softball Program

Focus on the fundamentals and quality individual hands-on instruction.

6 batting stations - Hitting Techniques and Review

Video of participants for swing evaluation, as time allows.

CCGSA has partnered with Rex Putnam high school for two 4 week hitting clinic sessions:

- There will be 2 sessions each night, please select your session preference.
There will be up to 18 participants per session, total of 36 participants for each 4 week session.
First come, first serve. For 10U, 12U, and 14U players only from CCGSA league teams.
Preference may be given to 2009 or older birth years.
Email registration to Karla Keller, CCGSA Treasurer, karlakeller785@yahoo.com - For?'s call 503-312-9735

DATES: Mark your preference:

(There will be two 4 week long sessions...sign up the 4 weeks and either the early (6p-7:15p) or late (7:15pm-8:30pm) session:

Session A1 === Early 6:00p-7:15p - 4 weeks - Tuesday (Jan 8, 15, 22, 29)

Session A2 === Late 7:15p - 8:30p - 4 weeks - Tuesday (Jan 8, 15, 22, 29)

Session B1 === Early 6:00p-7:15p - 4 weeks - Tuesday (Feb 5, 12, 19, 26)

Session B2 === Late 7:15p - 8:30p - 4 weeks - Tuesday (Feb 5, 12, 19, 26)

Location: Rex Putnam High School 4950 SE Roethe Rd, Milwaukie, OR 97267

Arrive early the first day, it can be hard to find the hitting facility (SW corner of the school by baseball field).

\*\*Please bring your bat and helmet\*\*

Minor Waiver & Release of Liability: In consideration of Rex Putnam making any equipment and/or facilities available while participating in the clinic. The undersign releases Rex Putnam and all employees, coaches, and players from any and all claims, demands, and causes of action whatsoever in any way growing out of or resulting from the undersigned player's participation in this clinic. Rex Putnam encourages all families involved with athletes to obtain health insurance.

PLAYER NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ DATE \_\_\_\_\_
ADDRESS \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_
PHONE 1: \_\_\_\_\_ Emergency Name \_\_\_\_\_ Emergency Phone \_\_\_\_\_
ASSOCIATION \_\_\_\_\_ TEAM (if known) \_\_\_\_\_ 10U \_\_\_ 12U \_\_\_ 14U \_\_\_

Parent/Guardian Name (Print) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Email: \_\_\_\_\_