**Misericordia University Softball**

Skills Clinics 2014 – 2015

**October 17 – Fielding Clinic**

**November 15 – Hitting Clinic**

**January 17, 2015 – Hitting Clinic**

Our softball clinics will be held on the campus of Misericordia University at the **ANDERSON SOFTBALL FIELD or in the ANDERSON SPORTS CENTER**. Parents and coaches are welcome and encouraged to attend. This is a great opportunity to learn from and interact with college coaches and players as well as participate in a great college atmosphere. Depending on which clinic you are attending, all campers should bring their: Glove, cleats, catching gear if applicable, helmet, and a bat if they own one, we have a limited number of bats and helmets we can provide.

These Clinics are designed for athletes of all ages. Space is limited, and early registration is needed for admittance.

\*\* **Pitching will NOT be covered in these clinics**. We have pitching clinics in January.

Friday October 17 – Fielding Clinic

**Time**: 5:00 pm- 6:30 pm

**Location**: Anderson Softball Field

**Cost**: **$25.00**

**Skills covered:**

* Overhand throwing & ball handling
* Position work (Will have opportunity to work at 2 fielding positions)

Saturday November 15 – Hitting Clinic

**Time**: 10:30 am- 12:30 pm

**Location**: Anderson Sports Center

**Cost**: **$50.00**

**Skills covered:**

* Swing break down
* Hitting Drills Circuit
* Bunt groups & wiffle front toss

Saturday January 17 – Hitting Clinic

**Time**: 1:00 pm- 3:00 pm

**Location**: Anderson Sports Center

**Cost**: **$50.00**

**Skills covered:**

* Swing break down
* Hitting Drills Circuit
* Bunt groups & wiffle front toss

**Registration 20 minutes before start time**

****\*\***PLEASE NOTE**: There are no rain/snow cancellation dates\*\*

Remove & Return This Portion of Form

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Primary Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ST\_\_\_\_\_\_\_\_ Zip\_\_\_\_\_\_\_\_

Parent Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Clinic Date(s) Attending\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total Amount Enclosed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consent and Agreement**

**In signing this Consent and Agreement Form, I affirm that my child is in good normal health, and has my permissions to participate in all clinic activities. I agree to assume all risk of such participation and further agree to indemnify, defend, and hold harmless Misericordia University, its officers, its directors, its employees, and all camp staff from any and all claims, suits, losses, demands, or related causes of actions for damages arising in any way out of my child’s participation in the Misericordia Softball Clinic or other activities on MU’s property.**

**Parent/Guardian’s listed above:**

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*\*\*Registration may also be emailed to [couturil@misericordia.edu](mailto:couturil@misericordia.edu)

and payment accepted on arrival\*\*\*

**Mail completed form and payment to:**

Attn: Jen Probst/Softball

301 Lake Street

Dallas, PA 18612

**\*\*Checks payable to: Misericordia University\*\***