



BASEBALL

St. Albans Baseball Winter Indoor Clinic

5:30 – 7:00 p.m.

Sunday, January 6

Sunday, January 13

Monday, January 21 (*MLK Jr. Holiday*)

Sunday, January 27

Martin Gym, St. Albans School

Ages 7-13

Cost \$120 for all sessions

Instructors:

STA Coaching Staff & Players

Goals of the Clinic:

- Form relationships between the STA baseball coaches, players, and friends
- Provide players with a warm, friendly atmosphere of instruction
- Allow players to interact with and lead members of their peer group
- Close-encounter instruction of the fundamental skills
- Allow players to compete in a supportive environment
- Help ready the body for an approaching season of baseball – and have fun!



BASEBALL REGISTRATION FORM

PLAYER NAME _____ DOB _____ AGE _____

PARENT NAMES _____ BEST PHONE NUMBER _____

EMAIL ADDRESS _____ SCHOOL _____

EMERGENCY CONTACT NAME _____

(DURING CLINIC HOURS, SHOULD NOT BE PARENT)

EMERGENCY CONTACT PHONE _____

WAIVER OF LIABILITY AND DISCLAIMER

I/we know that participation in the sport of baseball may result in serious or deadly injuries and protective equipment does not prevent all injuries to players. I/we hereby waive, release, absolve, indemnify and agree to hold harmless St. Albans School, the organizers, participants, and coaches from any claim arising out of the injury to my/our child whether the result of negligence or any other cause. In the event of an emergency where medical treatment is needed and I/we are unreachable, I give permission to the coaches/instructors to secure proper treatment and medical care for my child. In no event will St. Albans School or the Program's coaching staff be liable for any damages, including without limitation, direct or indirect, special, incidental, moral or consequential damages, loss of profits, opportunities or information or for expenses arising in connection with any services provided.

PARENT NAME _____

DATE _____

PARENT SIGNATURE _____

Please sign and return this form with a check for \$120 made payable to **St. Albans School** to reserve your spot.

Forms can be mailed to:

Jason Larocque

St. Albans School

Mount Saint Alban NW

Washington, DC 20016