

**JERRY'S FASTPITCH, LLC.
GIRLS FASTPITCH SOFTBALL CLINIC**

All instructions will be given by Coach Jerry Johnson

WHO: Softball Pitchers Ages 9-18 Beginning, Intermediate and Advanced levels.

WHEN: March 10, 2007

WHERE: OLD SHADY SPRING JUNIOR HIGH SCHOOL
159 GRANBY CIRCLE
DANIELS, WV 25832

CLINIC TIMES: Check in will be 15 minutes prior to each starting time.

Beginning/Intermediate Levels: 8:45am-12Noon

Advanced Level: 12:45pm-4pm (FOUR OR MORE YEARS EXPERIENCE)

****ALL PITCHERS ARE REQUIRED TO BRING THEIR OWN CATCHER AND BALL.**

ATTENDANCE: EACH LEVEL IS LIMITED TO 40 PARTICIPENTS

COST: \$30.00 **FREE T-Shirt Size:** SM ___ M ___ L ___ XL ___ Other _____

Make checks payable to: **JERRY'S FASTPITCH, LLC.**

Mailing Address: 100 Redbud Dr. Beckley, WV 25801

[www. Jerryfastpitch.com](http://www.Jerryfastpitch.com)

Please email registration to: jgerald01@suddenlink.net

Name: _____ **Email** _____

Address: _____ **City:** _____ **ST:** _____ **Zip:** _____

Age: _____ **Phone:** _____

Annotate which clinic you will be attending 8:45am-12Noon _____ or 12:45pm-4pm _____

-----CUT AND BRING DAY OF CLINIC-----

I hereby state that my child is in good health and has my permission to participate in all clinic activities. I authorize Jerry's FastPitch to act for me in securing medical treatment for my child in the event of injury or illness. Jerry's FastPitch is hereby released of any and all liability.

Parents Signature: _____ **Date:** _____

Print Name: _____ **Print Participant Name:** _____