

2012 Shakopee Sabers Baseball Clinics

Registration Form

Please circle the age level, type of clinic, dates, and the time the player will be attending
(Cost is \$10 per session or \$50 for all six sessions per clinic type = hitting or pitching)

Age: 10 or 11	Hitting	2/12	2/19	2/26	3/4	3/11	3/18
	at SMS					(noon-1:00 or 1:00-2:00)	
	Pitching	2/12	2/19	2/26	3/4	3/11	3/18
	at SHS					(1:15-2:15 or 2:15-3:15)	

Age: 12 or 13	Hitting	2/12	2/19	2/26	3/4	3/11	3/18
	at SMS					(2:00-3:00 or 3:00-4:00)	
	Pitching	2/12	2/19	2/26	3/4	3/11	3/18
	at SHS					(3:15-4:15 or 4:15-5:15)	

Age: 14 or 15	Hitting	2/12	2/19	2/26	3/4	3/11	3/18
	at SMS					(4:00-5:00)	
	Pitching	2/12	2/19	2/26	3/4	3/11	3/18
	at SHS					(5:15-6:15)	

(Age level should be the same age that players will be competing in summer ball 2012.)

All March 4th times will all be moved earlier two hours! March 11 and March 18 hitting sessions will move to SHS!

Player's name: _____

Parent's name: _____

Parent's e-mail: _____

Best Phone Number to call during clinics: _____



Please send completed registration form and payment to:

Tom Schleper
 SYBA
 1779 Presidential LN
 Shakopee, MN 55379
 (Checks should be made out to "SYBA")

E-mail: tschlepe@shakopee.k12.mn.us

Phone: 952-250-7607

As with any athletic training, there is risk of injury. SYBA and the Shakopee coaching staff will be cognizant of safety concerns with all athletes; however, by signing this form I understand that SYBA, the Shakopee Sabers Baseball Coaches, and ISD 720 will not be held liable for any injuries occurred at the Saber Baseball Clinics:

Parent's signature required: _____ Date: _____

Placement confirmed when registration and payment is received.