



2019 ASCENSION CATHOLIC SOFTBALL CLINIC



June 24- 27

9 AM-12 PM

LOCATION: Donaldsonville Fairgrounds 717 Church Street

GRADE LEVEL: (entering) 3rd -8th grades

Cost: \$90 Registration

SOFTBALL STAFF: Area Coaches and players **FEATURING** Constance Quinn

PLAYERS SHOULD BRING: glove, bat (if a preference),helmet, cleats, tennis shoes, any special equipment needed

** Clinic will cover but not limited to: correct fundamentals in hitting, fielding, throwing, baserunning, bunting , position specific drills etc.

***Players will receive a shirt, water will be provided, and a daily snack

Please either drop registration at AC High School office or Mail to : Mitzi Cassard

(cash or checks written to Ascension Catholic)

3560 Hwy 1 S

Donaldsonville, La 70346

Name of player _____ Address _____

City _____ Zip _____ Parents name _____

Parent's cell _____ Age _____ Entering grade _____

T-shirt size (circle one) YS YM YL AS AM AL AXL

ANY ALLERGIES _____

MEDICAL TREATMENT FORM:

Person to Notify in case of Emergency: _____

Relationship: _____ Phone Number: _____

Insurance Company

Name: _____

Policy

Number: _____ Allergies: _____

The undersigned hereby acknowledges that participation in this camp and related activities constitutes an inherent risk of injury, and the undersigned on behalf of the restraint, hereby assumes all risk and does hereby release and forever discharge the camp and all employees and agents thereof from any liability of whatever kind of nature arising from and by reason of any kind and all known and unknown damage to property, and the consequences resulting from participating in this camp, including any defect in equipment on premise.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____