

2010 Chi-Hi Spring Softball Clinics

Registration Form

Name: _____

Address: _____

City: _____ ZIP: _____

Phone: _____ Email: _____

Players should fill out the following:

Grade (Circle One): 3 4 5 6 7 8

School: _____

Parent/Guardian Name: _____

Indicate the sessions that you are registering for:

| | | | | |
|--|------------|--------------|------|--|
| <input type="checkbox"/> Pitching Session | Grades 3-5 | 8am—10am | \$25 | (\$15 if also attending a Def/Hit session) |
| <input type="checkbox"/> Pitching Session | Grades 6-8 | 10am—12pm | \$25 | (\$15 if also attending a Def/Hit session) |
| <input type="checkbox"/> Catchers Session | Grades 6-8 | 8:30am—10am | \$20 | (\$10 if also attending a Def/Hit session) |
| <input type="checkbox"/> Catchers Session | Grades 3-5 | 10:30am—12pm | \$20 | (\$10 if also attending a Def/Hit session) |
| <input type="checkbox"/> Defense/Hitting Combo | All Grades | 1pm—5:30pm | \$40 | |

Attend all 3 Sessions for \$70

TOTAL _____

Each girl that registers receives a free Softball T-Shirt. Please indicate size below:

Youth Medium Youth Large

Adult Small Adult Medium Adult Large

Mail this registration form along with your check (payable to **Chi-Hi Softball**) to:

Jared Faherty
576 East Summit Ave.
Chippewa Falls, WI 54729