

Hallie Girls Softball Spring Softball Clinics

Registration Form

Player Name: _____

Address: _____

City: _____ ZIP: _____

Phone: _____ Email: _____

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 | Sat. Apr 5, 2008 | 8am—10am | \$25 (\$15 if also attending a Def/Hit session) |
| <input type="checkbox"/> Pitching Session | Sat. Apr 5, 2008 | 10am—12pm | \$25 (\$15 if also attending a Def/Hit session) |
| <input type="checkbox"/> Catchers Session | Sat. Apr 5, 2008 | 10:30am—12pm | \$15 |
| <input type="checkbox"/> Defense/Hitting Combo | Sat. Apr 5, 2008 | 1pm—5pm | \$30 |
| <input type="checkbox"/> Defense/Hitting Combo | Sun. Apr 6, 2008 | 1pm—5pm | \$30 |

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 Hallie Girls Softball) to:

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