

Players Clinic

Who: Softball players (all age divisions welcome)

What: Presented by the Branham High School Softball team, this clinic will touch on many aspects of the game of fastpitch softball. We will cover the basic concepts of throwing, hitting, sliding, and base running, Player safety through dynamic stretching. Former and Current Players from the Branham Softball team (over 90% were WVLY slammers players) will be on hand to instruct and demonstrate all of the drills covered.

When: SATURDAY, FEBRUARY 16th, 2019
Check In: 9:00-9:15 a.m.
Clinic: 9:30-11:30

Where: BRANHAM HIGH SCHOOL SOFTBALL DIAMOND
1570 Branham Lane
San Jose 95118
CS Branham and Meridian

Bring: Glove, Bat, Helmet and Water

Cost: \$35 per player, includes Branham T-Shirt and Lunch
Please be a part of this fun event, a softball bat will be given away as a door prize. The event will include an accuracy throwing contest for a prize.

Make all checks payable to: Branham High School prior to camp.

Name: _____ Age Group: _____
Email: _____

Parent's Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____ T-Shirt Size: YM YL AS AM AL
AXL

BBQ lunch included choice of hot dog_____ or Hamburger_____

Parent's Consent to Allow Participation in Branham High School Softball Clinic

I hereby certify that my child is in good health and has my permission to participate in this program. I also give my permission for my child to receive any diagnostic, therapeutic and/or operative procedures as deemed necessary if emergency treatment is required and I cannot be reached. I realize that this sport involves the potential for injury, and I acknowledge that even with the use of protective equipment and observance of the rules, injuries may still occur. I hold harmless, Branham Softball including any individual, group, organization or corporation that directly or indirectly organized, sponsored, contributed, licensed or volunteered their efforts to this event, from all liabilities, damages, claims or demands whatsoever on account of any injury or accident involving the student arising out of participation in this training program.

Parent or guardian signature required

Date: _____

Please make sure that I can read the email address. I will be sending out a confirming email as well as any other Important information, especially if we have rain.