



Thanksgiving Softball

Pitching Clinics

Fastpitch Nation coaches will lead these clinics designed for pitchers of all ages and skill levels. FPN will offer two 2.5 hr classes of instruction.

- **PITCHING BASICS** – designed to give the young player a solid basic motion for them to practice.
- **INCREASING EFFECTIVENESS** – designed for the intermediate or advanced pitcher to review the mechanics, increase speed and accuracy and discuss new pitches.

Saturday, Nov. 26

- **Pitching Basics 9-11:30 am**
- **Increasing Effectiveness 12:30–3pm**

Cost is \$64 per clinic for members and \$60 for non-members. Register online at, www.fastpitchnation.net or stop in at the front desk. By mail send this form and a check to 62 Douglas St. Bloomfield, CT 06002. Call us at 860-242-0055.

Player's First Name _____ Player's Last Name _____

Address (Street, City, State, Zip)

Home Phone _____ Cell Phone _____ E-Mail _____

Date of Birth _____ Parents' Names _____

Medical Conditions _____

Comments _____

ATHLETIC LIABILITY WAIVER

In enrolling at or participating in events at Fastpitch Nation Sports Arena LLC, participant understands that he/she is attending the programs and using Fastpitch Nation Sports Arena LLC and the facilities at his/her own risk. Fastpitch Nation Sports Arena LLC, New England Softball Services LLC and its owners, employees or agents, shall not be liable for any damage whatsoever arising from any personal injury or property loss sustained by participant while on the premises of Fastpitch Nation Sports Arena, LLC. Participants and parents assume full responsibility for all injuries and damages, which occur in or about the premises and while participating in any programs thereon. He/She does hereby fully and forever release discharge hold harmless Fastpitch Nation Sports Arena LLC, New England Softball Services LLC and all its associated facilities and its members, managers, employees, and agents from any and all claims, demands, damages or rights of action, present or future resulting from any person's participation in any programs or use of the facility on behalf of themselves or their minor children. In addition, he/she agree(s) to follow the rules of conduct and play set by Fastpitch Nation Sports Arena LLC. Failure to do so may result in suspension from participation.

Consent: I the undersigned parent or guardian/participant do hereby grant authority to the staff at Fastpitch Nation Sports Arena LLC to make any decision concerning medical assistance or hospital care in the event of an accident or illness during my absence. I do hereby further authorize Fastpitch Nation Sports Arena LLC, New England Softball Services LLC, its members, managers, agents and employees to utilize any and all photographs, pictures or other likeness of my minor child, or me as they deem appropriate in its promotional materials or team films.

Guardian Name _____ Guardian Signature _____

Date _____