



## Li'l Panthers BASEBALL CLINIC

Ages: 4 & 5

Spring 2019 Fridays

Come learn the fundamentals of baseball at the Boys & Girls Club of Wayne!

- ✓ Throwing
- ✓ Catching
- ✓ Hitting
- ✓ Fielding



Each session will include:

- ✓ Activities to promote control and coordination
- ✓ Drills and Skills Games and relay races
- ✓ Plenty of fun

Who: Boys & Girls Club of Wayne Staff

Where: Dotterwich Field (In the event of rain, it will be held in the WBGC New Gym)

When: 7 Fridays. 10:30am or 1:00pm.

Start Date: April 26 (Depending on weather), 2019; Registration Deadline: April 19, 2019

Fee: \$90; Late Fee: \$5

\* Children must bring their own gloves\*

Online Registration Now Available!!

REGISTER EARLY!! SPACE IS LIMITED!!

\*\*All correspondence will be sent by e-mail\*\*

No refunds/credits will be given after the regular registration period has ended.

Cancellations prior to the deadline will be charged a \$5 processing fee.

Boys & Girls Club of Wayne  
153 Garside Ave.  
Wayne, NJ 07470  
973-956-0033

[www.bgcwnj.org](http://www.bgcwnj.org)

[www.facebook.com/bgcwnj](https://www.facebook.com/bgcwnj)

\*not a school sponsored activity\*



**Lil' Panthers**  
BASEBALL CLINIC

2019 Pre-K Baseball Clinic (Wayne Unit)

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Emergency Phone & Name: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_ T-Shirt Size (please circle one) yxs ys ym yl xxl

I would prefer the following session (please circle one): 10:30am 1:00pm

Parent/Guardian Information:

Mother's Name: \_\_\_\_\_ Work e-mail \_\_\_\_\_  
Business Name/Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Work e-mail \_\_\_\_\_  
Business Name/Address: \_\_\_\_\_  
Business Phone: \_\_\_\_\_

Does your child have any impairment? \_\_\_\_\_  
\_\_\_\_\_

**Sponsors:** We need sponsors to help defray the cost of our Pre-K Sports Programs. Sponsorships are \$100 and are tax deductible.

\_\_\_\_\_  
Company or Sponsor Name

\_\_\_\_\_  
Contact Person & Phone #

\_\_\_\_\_  
Company or Sponsor Address

I hereby give consent for my child to participate in the Boys & Girls Clubs of NWNJ Pre-K Lil' Panthers Program. I assume all risk in regard to participation in this and any other Boys & Girls Clubs of NWNJ program in which my child may participate. I release, indemnify and agree to hold harmless the Boys & Girls Clubs of NWNJ, Inc. its directors, officers, coaches, and volunteers from any liability that may result from participation in Boys & Girls Clubs of NWNJ activities. I further confirm that I have read and will abide by the Athletic Code of Conduct available to view at [www.bgcwnj.org](http://www.bgcwnj.org). To promote our programs at the Boys & Girls Club of Wayne, we would like to put photographs of our players on our website and other promotional material. Please check one of the following:

\_\_\_\_\_ Yes, I/We give my/our consent for my/our child's photograph to be used by the Boys and Girls Club of Wayne for promotional purposes.

\_\_\_\_\_ No, I/We do not give my/our consent to use my/our child's photograph to be used by the Boys & Girls of Wayne for promotional purposes.

By my signature, I attest to the following:

- That the above information is correct.
- That in the event of a medical emergency, I authorize the Boys & Girls Clubs of NWNJ to seek emergency medical care for my child as deemed necessary by the Director.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date