

UConn Baseball Pre-Game Clinics!



Saturday, April 18

11:30 a.m. @ J.O. Christian Field
UConn vs. Georgetown @ 1 p.m.!



Saturday, April 25

11:30 a.m. @ J.O. Christian Field
UConn vs. St. John's @ 1 p.m.!

Learn From Your Favorite Huskies!

Sign Up For FREE Today!



2009 UConn Baseball Clinic Signup

Fill out the form below and return it to:

Eric Girard
UConn Athletics
2111 Hillside Road Unit # 3078
Storrs CT 06269
Or fax to:
860.486.3831

<u>Date</u>	<u>Opponent</u>	<u>Clinic Time</u>	<u>Game Time</u>	<u>Clinic wanted (check)</u>	<u>Approx. # of participants</u>
APRIL					
Sat. 18	Georgetown	11:30 AM	1:00 PM		
Sat. 25	St. John's	11:30 AM	1:00 PM		

Please check the game(s) that you would like to attend a pre-game clinic with the Huskies. Once your clinic date has been confirmed, all players must fill out the enclosed consent form. If you have any questions, please contact Eric Girard at 860-486-0371 or via email at Eric.Girard@uconn.edu .

Contact: _____

Team Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____



UCONN BASEBALL CLINIC
ASSUMPTION OF RISK FORM

You must read this before you sign below:

In registering as a participant in and in consideration of being permitted by the University of Connecticut, I voluntarily agree to assume all risks of participation in these activities. Moreover, I release the University of Connecticut, its officers, employees, and agents, from claims of damage, demands, and actions whatsoever, (whether such damage be known or unknown), including attorney's fees in any matter arising out of or in connection with my participation in the University of Connecticut Athletic Department Baseball Clinic including, but not limited to, practice, participation in games, and/or maintenance and operation of playing fields and premises.

I have full knowledge of the risks involved in this activity, and I am physically fit and sufficiently informed to participate. I fully state that I am personally responsible for all risks of injury and damage to person or property in any way arising out of my participation in these activities.

By signing this, I certify that I am not a high school student. I also certify that I am not a current or former University of Connecticut student-athlete.

Dated: This _____ day of _____, 2009

Name of Contestant

Signature

Age of Contestant

Address

City, State, Zip Code

Home Phone Number

Parent's Signature (if under 18)