

# Grafton Girls Softball

## Catching Clinic Thursdays, 5:30 – 7:30pm November 6 – December 18 North Street School

The catching camp will cover all aspects of the position including receiving, blocking and throwing. Throwing out base runners, covering bunts, plays at the plate and other defensive situations will also be taught. High school catchers Olivia de Freitas and Erin Cardoza will run the camp. The cost is **\$25** to attend.

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### Clinic Registration Form

Player Name\_\_\_\_\_ Grade\_\_\_\_ Date of Birth\_\_\_\_\_

Parent Name\_\_\_\_\_ Cell Phone\_\_\_\_\_

Address\_\_\_\_\_ Email\_\_\_\_\_

**My daughter:** \_\_\_\_\_ has her own catcher gear \_\_\_\_\_ will need to borrow gear

**Cost: \$25**     *Please make check payable to "Grafton Girls Softball"*

**Please mail form to:**     Grafton Girls Softball  
   PO Box 80  
   Grafton, MA 01519

*For more information, please contact us at [info@GraftonGirlsSoftball.com](mailto:info@GraftonGirlsSoftball.com).*

### **PARENTAL AUTHORIZATION**

I, parent or guardian of the above named softball player, hereby give approval to her participation in the Grafton Girls Softball Catching Clinic. I assume all risk and hazards incidental to such participation including transportation to and from the activities; and do hereby waive, release, absolve, indemnify and agree to hold harmless the parent or Grafton Girls Softball, Inc., the organizers, sponsors, supervisors, participants, and persons transporting the girl to and from activities, for any claim arising out of an injury to the girl, except to the extent and in the amount covered by accident and/or liability insurance held by Grafton Girls Softball.

I also grant permission to managing personnel or other league representative to authorize and obtain medical care from any licensed physician, hospital, or medical clinic should the girl become ill or injured while participating in league activities away from home, or at other times when neither parent is available to grant authorization for emergency treatment.

I give permission to use my Daughter's picture and name on the GGSA website and in the local media.

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Parent or Guardian

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Relationship

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Date