



**Township of Cedar Grove
Recreation Department**
525 Pompton Ave. Cedar Grove, NJ 07009
(973) 239-1410 x220

Fall Development Softball Clinic
FOR CANCELLATIONS DUE TO INCLEMENT WEATHER;
“LIKE” US ON FACEBOOK, www.facebook.com/cedargroverec or
Call the Weather Hotline #973-230-9944

- **Who:** Ages 6-13 (from any town)
- **Where:** Panther Park – Softball Field – 118 W Bradford Ave, Cedar Grove
- **When:** September 26-September 29th
- **Time:** 6:00-8:00pm
- **Fee:** \$125.00/child
\$10 late fee added after 9/9/22
- **Drop-in Fee:** \$50.00 per day

Description: Coach, Nikki Velardi and Staff will be holding a Fall Development Softball Clinic. Sessions will be geared toward skill development, physical development, all with some fun mixed in! This clinic will promote concepts of hard work, dedication, and commitment toward achieving a goal. Come learn the game! We recommend that all players attending the clinic bring the following: Cleats/Sneakers (no metal cleats), Catchers Equipment, Water Bottle, Hat/Visor, Glove, Bat.

Fall Development Softball Clinic - 2022

NAME _____ Age _____ DOB _____

ADDRESS _____ TOWN _____

MAIN PHONE _____ EMERGENCY CONTACT _____

EMAIL _____ PREFERRED HOSPITAL _____

Any Allergies/Health Conditions we should be aware of? (If Yes, explain) _____

T-Shirt Size: Please Circle YOUTH or ADULT & Small Medium Large XL(adult only)

I will not hold Cedar Grove Township, Cedar Grove Recreation or any of their representatives responsible for any loss or injury I may incur while playing or practicing. I am in good health and able to participate without restriction. I also authorize Cedar Grove Recreation Department personnel/coaches to contact appropriate emergency personnel, should I need medical assistance. In conjunction with the child's participation in the recreation program, the Township may make or arrange to make certain images of a child or children participating in such activities, such as still photographs, video tapes or other recorded moving images. I consent to, give permission for and authorize the Township to use the images of the child.

Parent/Guardian Signature _____ **Date** _____

\$125.00