

# Lefty's Winter Clinics 2007 - 2008

Clinic #	Dates	Time	Description	Clinic #	Dates	Time	Description
<b>**HS201</b>	As Needed		HS Catching	<b>**LL101</b>	1/6-3/9 10 Sundays	8:30-10:00am	LL Hitting & Conditioning
<b>**HS205</b>	1/6-3/9 10 Sundays	10:00-11:30am	HS Hitting and Conditioning	<b>LL102</b>	1/12,19/26 Saturdays	9:30 - 11:00am	LL Hitting
<b>SB101 Softball</b>	1/12,19,26 Saturdays	9:30-11:00am	SB Hitting	<b>LL103</b>	2/2,9,16 Saturdays	9:30 - 11:00am	LL Hitting
<b>SB102 Softball</b>	2/2,9,16 Saturdays	9:30-11:00am	SB Hitting	<b>LL104</b>	2/23, 3/1,8 Saturdays	9:30 - 11:00am	LL Hitting
<b>SB103 Softball</b>	2/23, 3/1,8 Saturdays	9:30-11:00am	<b>Slap Hitting</b>	<b>LL105</b>	3/15,22,29 Saturdays	9:30 - 11:00am	LL Hitting
<b>SB102 Softball</b>	3/15,22,29 Saturdays	9:30-11:00am	SB Hitting	<b>LL106</b>	1/21,28,2/4 Mondays	7:00 - 8:30pm	LL Pitching
<b>SA101 Strength &amp; Agility</b>	2x per week Mon-Sat	As Assigned	Strength & Agility Workouts	<b>LL107</b>	2/11,18,25 Mondays	7:00 - 8:30pm	LL Pitching

**High School = HS      Little League = LL      Softball = SB**

Lefty's Winter Clinics strive to reinforce the basics, offering players the ability to advance from where they are to the next level of play. Our instructors will work on mechanics and fine tune your skills into sound baseball or softball fundamentals. If you put the time in during the winter months, you are bound to see improvement when you take the field in the spring!

## Lefty's Registration Form

Name: \_\_\_\_\_ D.O.B.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_ @ \_\_\_\_\_

Please register my son / daughter for the following clinics. I understand that there will be NO cash refunds. Any participant missing an entire clinic will be issued a Lefty's Credit minus a \$30.00 administration fee. No refunds for missing single clinic dates. Please use a separate form for each participant.

All 3 week - 4.5 hour Clinics, please include \$130.00

10 Week Clinics: HS205, LL101 please include \$330.00

SA101 = 8 session intro @ \$97.00 per month

\_\_\_\_\_  
 Parent/Guardian Signature

**PAYMENT MUST BE INCLUDED**

Clinic #: \_\_\_\_\_ Clinic #: \_\_\_\_\_

Method of Payment: Cash    Check    MC    Visa    Amex  
 Card#: \_\_\_\_\_

**Mail checks to: Lefty's Sports Academy  
 840 Bloomfield Ave.— Clifton, NJ 07012**

Exp. Date: \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_