

I.S.T. & Westport Little League Girls' Softball

2014 Advanced Skills Development Clinics: **Grades 4-6**

K to 3rd grade clinic information also included!

All programs are located at Staples Field House* in Westport and will be run by Sara Holland and I.S.T.'s Pro Coaching Staff**. All participants in WLL winter programs must be registered for spring season prior to first session

Note: Weekend clinics include fielding, throwing, hitting and agility. Weekday clinics focus mainly on hitting & throwing and are limited to 8 participants. Pitching clinics are pitching only.

Grades K to 3rd

2014 Westport Little League Sundays 8AM to 930AM boys and girls Skills clinic
Visit www.integratedsportstraining.com and click register now

Grade 4th -5th: Hitting, fielding throwing (8 player limit)
8 WEEKS Tuesdays 1/7, 1/14, 1/21, 1/28, 2/4, 2/11, 3/4, 3/11
6PM – 7PM Cost \$160 **WSPTS101**

Grade 6th -7th : Hitting, fielding throwing (8 player limit)
8 WEEKS Thursday 1/9, 1/16, 1/23, 1/30, 2/6, 2/13, 3/6, 3/13
6PM to 7PM Cost \$160 **WSPTS152**

INTRODUCTION TO PITCHING Grade 3rd-4th: We will be learning the basic pitching mechanics of fast-pitch softball
9 WEEKS: Fridays -1/3, 1/10, 1/17, 1/24, 1/31, 2/7, 2/28, 3/7, 3/21 (off 2/21 & 3/14)
7:15PM to 8:15PM Cost: \$180 **WSPTS103**

INTERMEDIATE PITCHING: Grade 5th -6th : The key to being a successful pitcher is learning to control your fastball and keep hitters guessing at the plate. We will be developing *speed, a change-up, and locating pitches*.
9 WEEKS: Fridays -1/3, 1/10, 1/17, 1/24, 1/31, 2/7, 2/28, 3/7, 3/21 (off 2/21 & 3/14)
7:15PM to 8:15PM Cost: \$180 **WSPTS104**

HITTING CLINIC Grade 5th -6th
8 WEEKS: Mondays - 1/6, 1/13, 1/20, 1/27, 2/3, 2/10, 2/24, 3/3,3/10 (Off 2/17)
6:00PM to 7:00PM Cost \$160 **WSPTS105**

*Please fill out registration on page 2 and return to
I.S.T. Baseball Headquarters, 25 Van Zant St.
Unit 3B Norwalk, CT. 06855.
Email istbaseball22@yahoo.com with questions.

**2014 I.S.T. BASEBALL HEADQUARTERS- Westport Softball
WINTER CLINIC REGISTRATION FORM**

Please fill in below and keep the Program portion for your records

**Make checks payable to I.S.T. and send to I.S.T. Baseball, 25 Van Zant St. Unit 3B Norwalk, CT. 06855
Contact: istbaseball22@yahoo.com with program questions**

**Programs are not pro-rated due to missed sessions. Program is Non-refundable after start of program.
Player must register for Westport Little League to be eligible to participate in winter clinics**

NAME OF PARTICIPANT _____

ADDRESS _____ HOME PHONE _____

HOME E-MAIL ADDRESS _____

ANY ALLERGIES _____ SPECIAL NEEDS/ACCOMODATIONS _____

GRADE AS OF SEPT 13 _____ AGE AS OF DEC 31/13 _____

EMERGENCY CONTACT _____ PHONE _____
(other than parent, guardian)

ENTER BELOW THE PROGRAM NAME, CODE AND FEE FROM FIRST PAGE:

PROGRAM

PROGRAM CODE

PROGRAM FEE

FOR OFFICE USE ONLY

APPLICATION NOT VALID UNLESS SIGNED BY PARENT, GUARDIAN OR ADULT PARTICIPANT I am aware of the nature of the above activity and I hereby assume responsibility for the above-named person to participate. I will not hold the Town of Westport, I.S.T. Baseball Headquarters , Westport Little League and/or its' employees, agents or volunteers responsible in case of accident or injury as a result of this participation.

TOTAL PAYMENT _____

SIGNATURE OF PARENT/GUARDIAN OR ADULT PARTICIPANT _____