



South St. Paul Traveling Baseball Winter Training



When: Sundays 11:00 am to 1:00 pm January 6th – February 24th, 2019 (Excludes Jan. 27)

Who: Traveling players ages 12-15 yrs. old

Where: Packer Activity Center, 700 2nd Street N, SSP 55075

Cost: \$30.00 Includes PAC Rental, group drills, & training.
\$5.00 drop in fee per session also available

Make checks out to SSPYBA: Mail in with completed copy or bring to your 1st session.

What: Structured weekly training and drills. Example of a Sunday training session will include 15-20 minute warm-up, 25 minute session infield, 25 minute session outfield, 25 minute session hitting, 25 minute cool down/game/skill specific session. Fielding drills, pitching and throwing mechanics, hitting mechanics, hitting off the batting t's, , working soft toss with a coach, hitting off a pitching machine, and more.

**PLEASE NOTE THAT PLAYERS USE THEIR OWN EQUIPMENT AT THEIR OWN RISK AND SSPYBA IS NOT RESPONSIBLE FOR DAMAGED, LOST, OR STOLEN EQUIPMENT!!

Mail to SSPYBA, PO Box 725, South St. Paul, MN 55075

Name _____ **Grade** _____ **DOB** _____

Parent/Guardian _____ **Phone #** _____

Email Address _____

Address _____

Emergency Contact: Name _____ **Phone:** _____

Parent/Legal Guardian Agreement

I, the parent/guardian/participant, in registering, understand that he/she/I in attending the above program and using the facilities at which the program is conducted does so at his/her/my own risk. SSPYBA, and its employees and agents, shall not be liable for any damages whatsoever arising from any personal injury or property loss sustained by participating in or about any programs offered by SSPYBA. I acknowledge that I am aware of the risk inherent in participating, that considerable physical exertion can be required; and could potentially lead to injuries; possible permanent disability and or death. Participants and parents/guardians assume full responsibility for all injuries and damages which may occur in or about any programs and he/she/I do or does hereby fully and forever release, discharge and hold harmless SSPYBA, all associated facilities and its owners, employees and agents from any and all claims, demands, damages, rights of action, present and future resulting from or arising out of any participation in any programs or use of facilities. Also, he/she/I waives all rights to any photos taken for use in any SSPYBA publication.

Parent/Legal Guardian Signature _____ **Date** _____