



GIRLS SOFTBALL CLINIC

Ages 6 to 13*
 (*Age as of October 15, 2019)
 9am - noon
 Monday - Friday
 JULY 8th - 12th

****Location Change** Edwards Field**

FEE: \$59 Residents \$78 Non Residents (Includes a tee-shirt)

Instructed by Brunswick High School Varsity Softball Coach Hugh Dwyer!

REGISTER ONLINE!

The week-long clinic will be held from 9am - noon, Monday thru Friday at Edwards Field and is open to girls ages 6 to 13, as of October 15, 2019. Registration fee is \$59 Residents / \$78 Non- residents.

(Kids on the Field is also available to 6 year olds who are new to softball. See different flyer on our website.)

ABOUT OUR DIRECTOR: Prior to coaching girls' sports, Mr. Dwyer coached baseball at various levels throughout the Brunswick community. A former President of the Brunswick Cal Ripken program, Coach Dwyer also served as the Director of the Brunswick Parks and Recreation Department's junior baseball program for six years along with serving as the recreation department's director of youth basketball for seven years.

This program is designed to introduce girls with instruction in the fundamentals with the sport of softball. Emphasis in all areas of play will be stressed. Practices and games are designed to apply skills as well as providing girls with a fun opportunity to interact with high school players. Attention will be given to all skill experiences. **BRING YOUR GLOVE!**



For a copy of our refund policy, please visit our office at 220 Neptune Drive or our website at www.brunswickme.org **REGISTER ONLINE!**

The Parks and Recreation Department encourages individuals with disabilities to register for this program. Should you desire further information, contact the Recreation Department at 725-6656.

✂ **Detach & return with fee** to the Brunswick Recreation Center 220 Neptune Drive by **July 3rd** Hours Mon-Fri 8 am- 4:30 pm ✂
BRUNSWICK PARKS & RECREATION DEPT. GIRLS SOFTBALL CLINIC – SUMMER 2019

FEE: \$59 residents; \$78 Non Residents

(Please Print)

Name _____ Date of Birth _____ Age as of Oct. 15th, 2019 _____

Street Address _____ Town _____ Zip _____

Town of Residence _____ School _____ Grade, fall 2019 _____

Parent/Guardian #1 _____ EMAIL _____

Parent/Guardian #1 Home Phone _____ Parent/Guardian #1 Work Phone _____ Parent/Guardian #1 Cell _____

Parent/Guardian #2 _____ EMAIL _____

Parent/Guardian #2 Home Phone _____ Parent/Guardian #2 Work Phone _____ Parent/Guardian #2 Cell _____

EMERGENCY Contact, other than parent: _____ Relationship _____

Day Phone _____ Cell _____

*ALLERGIES/PHYSICAL OR EMOTIONAL LIMITATIONS _____

For Office Use
 Date _____
 Amt\$ _____
 Computer
 121076-01



***WOULD YOU LIKE TO BE CONTACTED BY OUR THERAPEUTIC RECREATION COORDINATOR REGARDING THE ABOVE?**

YES NO

As a parent, I give my child permission to participate in the Brunswick Parks and Recreation Department Girls Softball Clinic. I understand that photographs taken of Parks and Recreation Programs may be used by the Parks and Recreation Department for promoting programs, classes or events to include brochures, posters or web page postings.

Signature of Parent/Guardian _____

Names of Parents/Guardians _____ (PLEASE PRINT)