



# Pitching & Hitting Clinics

@ Elizabethtown College, Thompson Gymnasium

## Pitching Clinic Sunday's Jan. 21, 28; Feb. 11, 18

Must bring your own catcher at no extra cost. Note: We will accept only 15 pitchers per time slot, register early! Our goal is to provide each participant with additional knowledge about the fastpitch pitching motion. Ages: 8-18. Beginner, intermediate and advanced pitchers welcome.

12:15—1:00 pm 1:00—1:45 pm 1:45— 2:30 pm  
Cost: \$80/four weeks or \$30/per week

**Directions:** Exit Rheems/E-town exit off of Route 283. From Lancaster, turn left at end of exit ramp/from Harrisburg turn right onto Cloverleaf Road and proceed one mile to Route 230. Turn right and travel west toward Elizabethtown. Turn right onto College Avenue. Continue through the second stop sign and look for Leffler Chapel on your right. Turn right into Leffler Chapel and park on either the left or right side of Chapel. Thompson gym is to the right of the Chapel.

## Hitting Clinic Sunday's Jan. 21, 28; Feb. 11, 18

Note: We will accept only 21 hitters per time slot, register early! Our goal is to provide each participant with additional knowledge about hitting. This clinic will zero in on the mechanics of the hitting motion using drills to correct or adjust the motion. If you want to improve your batting average, this is the clinic for you. Bunting will be covered as well. Ages: 8-18.

12:15—1:00 pm 1:00—1:45 pm 1:45—2:30 pm  
Cost: \$80/four weeks or \$30/per week

Questions: Call Coach Kathy Staib 717.361.1533 or email [staibk@etown.edu](mailto:staibk@etown.edu)

---

### 2018 Pitching & Hitting Clinics

Name \_\_\_\_\_ Pitching: \_\_\_\_\_ Hitting: \_\_\_\_\_  
I will attend: Jan 21: \_\_\_\_\_ Jan. 28: \_\_\_\_\_ Feb. 11: \_\_\_\_\_ Feb. 18: \_\_\_\_\_  
Time Slot: 12:15 – 1:00 pm \_\_\_\_\_ 1:00 – 1:45 pm \_\_\_\_\_ 1:45 – 2:30 pm \_\_\_\_\_  
Phone number (\_\_\_\_) \_\_\_\_\_ Emergency number (\_\_\_\_) \_\_\_\_\_

**Mail to:** Elizabethtown College, Attn: Softball Office, One Alpha Drive, Elizabethtown, PA 17022

Amount of check: \_\_\_\_\_ **Checks payable to:** Elizabethtown College

I understand that neither Coach Staib, Elizabethtown College, nor anyone connected with the fast pitch clinics will assume and responsibility or accidents, medical, dental or other expenses incurred as the result of accident sustained during my daughters stay at the clinic. I also, certify that she is in good health and able to participate in all clinic activities.

Parent/Guarding signature (mandatory)

\_\_\_\_\_ Date \_\_\_\_\_