



**Nashoba Baseball 18th Annual
Baseball Clinic – Saturday, March 18th, 2023
(Snow date March 25th)**

Nashoba Regional High School - Rt. 117, Bolton, MA

Two Sessions Available: or sign up for both!

9:00 - 12:00 (registration at 8:30 if not pre-registered) OR

1:00 - 4:00 (registration at 12:30 if not pre-registered)

Kids separated into 3 age groups: 5- 7 yrs. old, 8-10 yrs. old and 11-13 yrs. old

Schedule will cover position instruction/drills, batting instruction/drills. Our goal is to help in the development of young players, increasing their overall knowledge and skills in the game of baseball. Quality instruction will be given on all aspects of the game and emphasis will be on fundamentals and team play. Kids from everywhere are welcome!

All proceeds from this clinic support the Nashoba Regional H. S. Baseball teams

Clinic Staff:

- ❖ **Chuck Schoolcraft**, NRHS Varsity Baseball Coach, AAU Coach
- ❖ **Mike DiPietro**, NRHS Varsity Asst Baseball Coach
- ❖ **Charlie Tinschert**, NRHS Junior Varsity Baseball Coach
- ❖ NRHS Certified Athletic Trainer

Cost: Pre-registration: **\$40 one session \$65 for both** Includes a t-shirt!
Day of Clinic: **\$45 one session \$70 for both** (Can't guarantee spot if not pre-registered)

Drinks: Gatorade and water will be available for purchase (\$1.00) or bring your own.

Lunch: Bring your own, if you plan on attending both sessions

Name: _____ Age: _____ Current Grade: _____

Address: _____ Phone: _____

Session (choose one or both): Morning () Afternoon () both ()

Age Group: 5-7 years old () 8-10 years old 11-13 years old ()

T-shirt size: Adult sizes - S M L XL (Not pre-registered, cannot guarantee correct size t-shirt)

In case of emergency notify: _____ **Phone:** _____

(The above information is for the day of the clinic)

The above named participant has my permission to participate in the clinic program above. In case of emergency, I understand every attempt will be made to contact the person(s) above. If contact is unsuccessful, I give my permission to the tending personnel to render medical treatment to the participant, including (if necessary) hospitalization. Any expense arising from injury or illness is the responsibility of the person signing on this line:

Signature: _____ **Date:** _____

Insurance Company: _____ **Policy #:** _____

**Application will not be processed without proper insurance information.

After March 14th there is no more mail in registrations. After March 4th, please contact Coach [Schoolcraft/508-561-4268/cschoolcraft@nrzd.net](mailto:cschoolcraft@nrzd.net), to get your son/daughter in the data base and then bring this registration form on Saturday. Checks are made payable to Nashoba Athletics Booster Club. Please mail registrations to Nashoba Regional High School, 12 Green Rd. Bolton, MA, 01740, Attn: Coach Schoolcraft.