

# Bill Hillhouse 2-Day Pitching Clinic

Presented by AllAboutFastpitch.com  
October 10 & 11, 2009 ~ St. Francis High School

**Pitching Clinic Registration – Cost: \$50.00 per participating pitcher (includes BOTH days)**

Pitcher's Name/Age: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ e-mail: \_\_\_\_\_  
 \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_ Parent/Guardian Phone: \_\_\_\_\_

**Mark Your 1<sup>st</sup> & 2<sup>nd</sup> choice for Each Day Below**

Saturday – Oct. 10	Sunday – Oct. 11	
_____ 9:30-11:30 ~ Ages 8-12	_____ 9:00-10:00	_____ 1:00-2:00
_____ 12:00-2:00 ~ Ages 12+	_____ 10:15-11:15	_____ 2:15-3:15
_____ 2:45-4:45 ~ Ages 12+	_____ 11:12-12:30	_____ 3:45-4:45

**Make checks payable to:**  
 Stacie Mahoe – All About Fastpitch  
 89-346B Mano Avenue  
 Nanakuli, HI 96792

**Deadline to Register** is **Sept. 26, 2009**. Pitching clinic cancellations subject to a \$5.00 administrative fee.  
 \*\*\*All pitchers must supply their own catcher\*\*\*

**RELEASE:**

I/We, the undersigned, individually and as parent's) and /or guardian's) of \_\_\_\_\_, a minor, ask that she be admitted to participate in the Bill Hillhouse House of Pitching Clinic and/or Team Session. In consideration of such admission, I/we do hereby agree to release, discharge, and hold harmless the Bill Hillhouse, House of Pitching, Hawaii ASA/OJO, AllAboutFastpitch.com, its officers, agents, and employees of and from all causes, liabilities, damages, claims, or demands whatsoever on account of any injury or accident involving the said minor arising out of the minor's attendance at the camp or in the course of any activities held in connection with the camp.

\_\_\_\_\_  
 Mother/Guardian Signature

\_\_\_\_\_  
 Father/Guardian Signature

**EMERGENCY HEALTH INFORMATION**

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Emergency Contact	Relationship	Phone Number(s)
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Physician Name	Hospital	Phone Number
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