

RELEASE & WAIVER

I, _____ (Name of parent or legal guardian of participant), hereby grant permission for _____ (Clinic participant) to participate in the Norwich Sea Unicorns Baseball Clinic at Dodd Stadium. The Norwich Sea Unicorns have informed me, and I understand that since I (or the minor) am not an employee of the Norwich Sea Unicorns in any capacity, I (or the minor) will not be insured by the Norwich Sea Unicorns during this activity and that the Norwich Sea Unicorns will not be responsible for any injury that might occur as a result of this activity. I have advised the Norwich Sea Unicorns that I will release them and others of liability for any type of personal injury, including death, or property damage that I (or the minor) might sustain as a result of this activity. I understand that this is the only basis upon which the Norwich Sea Unicorns would permit me to participate in this activity.

Accordingly, in consideration of receiving permission to participate in this activity, I hereby agree on behalf of myself and my heirs, legatees, distributees, administrators, executor, successors, assigns, and any other person who might seek to recover damages for injury to me or my minor child, to waive any and all rights regarding, and to release and hold harmless and indemnify the Oneonta Athletic Corp. D.B.A. Norwich Sea Unicorns, the City of Norwich, the Norwich Stadium Authority, and their affiliated companies and partnerships, and their respective directors, officers, officials, employees and agents (collectively, "Releases") from and against any and all claims, actions, proceedings, liabilities, damages, and expenses related directly or indirectly to personal injury (including death) or damage to personal property caused or incurred by me related in any way to my participating as herein described.

This release and waiver is without limitation, and it includes a waiver against negligence of any agent, employee, licensee, or invitee of any release.

My signature below indicates that I have read this release, and it includes a waiver, and that I understand and agree to be legally bound by its terms.

Parent/Legal Guardian Signature _____

Street Address _____

City/State/Zip Code _____

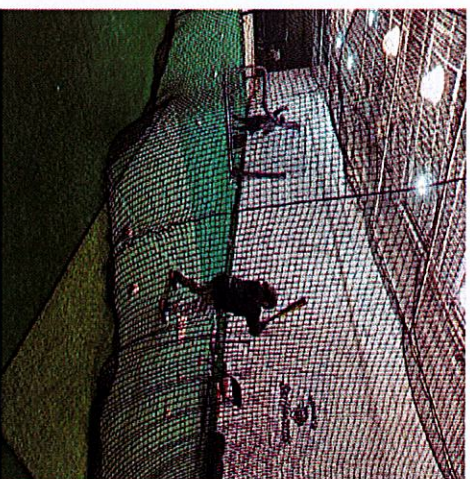
Date _____

CAMP INFO

EQUIPMENT—The hitting school will be held inside the Sea Unicorns heated indoor batting cage. Please dress appropriately (no baseball spikes) and bring your own bat and helmet if you have them. Please also bring your own drinks.

FACILITIES—Participants will receive instruction in the indoor batting cage at Dodd Stadium from Norwich Sea Unicorns coaches.

WEATHER—The clinic is a rain or shine event. We will be utilizing the indoor batting facility at Dodd Stadium. Should snow become an issue, we will send an alert via email or text early in the morning of the hitting school.



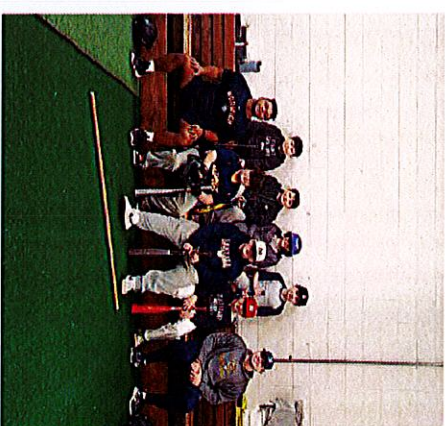
For More Information, Contact:
Norwich Sea Unicorns

Dodd Stadium
14 Stott Ave
Norwich, CT 06360

Phone: 860-887-7962
Fax: 860-886-5996
E-mail:
info@goseaunicorns.com

NORWICH
Sea Unicorns[™]

KIDS HITTING CLINIC



SATURDAY, JANUARY 13, 2024

9AM-11AM

SUNDAY, JANUARY 14, 2024

9AM-11AM

LIMIT OF 10 PLAYERS PER SESSION

DODD STADIUM

INDOOR BATTING CAGES

BOYS & GIRLS AGES 6-15

**HAVE FUN & LEARN
FROM THE SEA
UNICORNS!**

2024 SEA UNICORNS HITTING CLINIC

SAMPLE DAY

8:45am - Check-in
9:00am - Warm-ups and stretching
9:15am - 11:00am- work through hitting mechanics and drills to better your swing as you prepare for spring baseball.

CLINIC SIGN-UP FORM



CLINIC DATES	COST
<input type="checkbox"/> Jan 13, 2024	\$100
<input type="checkbox"/> Jan 14, 2024	\$100
<input type="checkbox"/> Both Sessions	\$175
<input type="checkbox"/> Multi-Child Discount	-\$25 per
TIME 9:00-11:00	

Camper's Name _____

Age and date of birth _____

Parent Name _____

Address _____

Contact Phone Number _____

Parent's email address _____

Method of Payment

- ☐ Check made out to Norwich Sea Unicorns
☐ Visa ☐ MasterCard
☐ American Express ☐ Discover
☐ Cash

Name On Card _____

Credit Card # _____

Expiration Date _____

Signature _____

Security Code _____

Please Complete Form Above AND Release & Waiver On The Back Of This Page and Mail To:

Sea Unicorns Baseball Clinic

Dodd Stadium

14 Stott Avenue

Norwich, CT 06360

Or Fax To: (860) 886-5996

2024 NORWICH SEA UNICORNS BASEBALL CLINIC



WELCOME

The Norwich Sea Unicorns are proud to once again offer their Instructional Baseball Clinics for the 2024 season.

Your baseball stars of the future (between 6 and 15 years old) will learn the fundamentals of baseball, sportsmanship, and having fun from the collegiate players and coaching staff of the Norwich Sea Unicorns.



OBJECTIVE

The objective of the Sea Unicorns baseball clinic is to teach the fundamentals of baseball and sportsmanship in an enjoyable atmosphere to kids aged 6 to 15. All abilities and both boys and girls are welcome to participate. Participants will be broken into groups based on their age and ability to facilitate learning. The program is designed to help improve skills, boost confidence and expose participants to the joy of baseball.

