

## 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, administrator, 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, "Releasers") 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 \_\_\_\_\_

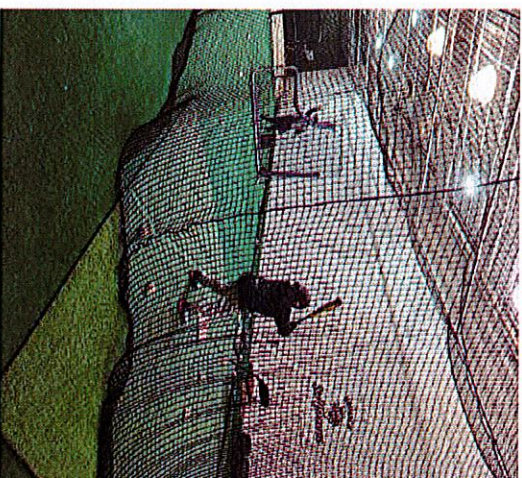
Date \_\_\_\_\_

## CAMP INFO

**EQUIPMENT**—Each participant will be given a clinic T-shirt and should bring shorts/baseball pants or sweat clothes. Cleats or running shoes are necessary. Cold water will be provided to ensure the safety of all campers.

**FACILITIES**—Participants will receive instruction on the playing surface at Dodd Stadium from Norwich Sea Unicorns players and coaches. They will also have access to the bullpens and in-door batting cage.

**WEATHER**—The clinic is a rain or shine event. We are able to utilize the indoor batting facility at Dodd Stadium to provide continued instruction despite weather that is not ideal.



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](mailto:info@goseaunicorns.com)

NORWICH  
*Sea Unicorns*<sup>™</sup>

KIDS BASEBALL CLINIC



JUNE 24-26, 2024  
JULY 29-31, 2024

ALL CLINIC ATTENDEES RECEIVE  
A TICKET VOUCHER TO ATTEND  
ANY SEA UNICORNS HOME GAME

DODD STADIUM

BOYS & GIRLS AGES 6-15

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

2024 SEA UNICORNS BASEBALL CLINIC

## SAMPLE DAY

- 8:30am - Check-in
- 9:00am - Warm-ups and stretching
- 9:15am - 11:30am- Station teaching where campers will rotate through various stations stressing the fundamentals of hitting, fielding, throwing, base running, position work and pitching mechanics.
- 11:30am - 12:00pm - Lunch in picnic area
- 12:00pm - 1:00pm - Game play on field
- 1:00pm - Clinic ends

## CLINIC SIGN-UP FORM



CLINIC DATES	COST
<input type="checkbox"/> June 24-26, 2024	\$200.00
<input type="checkbox"/> July 29-31, 2024	\$200.00
<input type="checkbox"/> Both Sessions	\$350.00
<input type="checkbox"/> Multi-Child Discount	-\$25 per
TIME 9:00-1:00	

Camper's Name \_\_\_\_\_

Age and date of birth \_\_\_\_\_

**Camper's T-shirt Size** (Circle one) Youth- S M L XL Adult- S M L XL

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  Venmo Sea-Unicorns-23

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 staff of the Norwich Sea Unicorns.

Included with the registration fee is a Sea Unicorns Baseball Clinic T-Shirt and ticket voucher to any Sea Unicorns home game in 2024!

Lunch will be served each day from 11:30-moon.



## 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.

