

Registration

Please denote desired sessions by marking a "check mark" in the appropriate column.

After School Instructional Baseball/Softball Clinic (Ages 5 - 8) \$215.00

| | #1 (7 weeks) | #2 (7 weeks) | #3 (7 weeks) | #4 (7 weeks) | #5 (8 weeks) |
|-----------|-------------------------------------|--------------------------------------|-----------------------------------|------------------------------------|-------------------------------------|
| Monday | <input type="checkbox"/> 9/12-10/24 | <input type="checkbox"/> 10/31-12/12 | <input type="checkbox"/> 1/2-2/13 | <input type="checkbox"/> 2/27-4/16 | <input type="checkbox"/> 4/23-6/11* |
| Tuesday | <input type="checkbox"/> 9/13-10/25 | <input type="checkbox"/> 11/1-12/13 | <input type="checkbox"/> 1/3-2/14 | <input type="checkbox"/> 2/28-4/17 | <input type="checkbox"/> 4/24-6/12 |
| Wednesday | <input type="checkbox"/> 9/14-10/26 | <input type="checkbox"/> 11/2-12/14 | <input type="checkbox"/> 1/4-2/15 | <input type="checkbox"/> 2/29-4/18 | <input type="checkbox"/> 4/25-6/13 |
| Thursday | <input type="checkbox"/> 9/15-10/27 | <input type="checkbox"/> 11/3-12/15* | <input type="checkbox"/> 1/5-2/16 | <input type="checkbox"/> 3/1-4/19 | <input type="checkbox"/> 4/26-6/14 |
| Friday | <input type="checkbox"/> 9/16-10/28 | <input type="checkbox"/> 11/4-12/16* | <input type="checkbox"/> 1/6-2/17 | <input type="checkbox"/> 3/2-4/20 | <input type="checkbox"/> 4/27-6/15 |

*6 weeks
6 weeks - \$185

No class the week of 4/2

*7 weeks
8 weeks - \$240

FIRST COME FIRST SERVED - CLASS LIMIT 36 PLAYERS

Mini Slugger Program (Ages 3-4) \$170.00

Please Check The Appropriate Boxes

| | #1 (5 weeks) | #2 (5 weeks) | #3* (4 weeks) | #4 (5 weeks) | #5 (5 weeks) | #6 (5 weeks) | #7 (6 weeks) |
|-------|-------------------------------------|--------------------------------------|--------------------------------------|-----------------------------------|------------------------------------|------------------------------------|------------------------------------|
| Mon. | <input type="checkbox"/> 9/12-10/10 | <input type="checkbox"/> 10/17-11/14 | <input type="checkbox"/> 11/28-12/19 | <input type="checkbox"/> 1/2-1/30 | <input type="checkbox"/> 2/6-3/12 | <input type="checkbox"/> 3/19-4/23 | <input type="checkbox"/> 4/30-6/4* |
| Tues. | <input type="checkbox"/> 9/13-10/11 | <input type="checkbox"/> 10/18-11/15 | <input type="checkbox"/> 11/29-12/20 | <input type="checkbox"/> 1/3-1/31 | <input type="checkbox"/> 2/7-3/13 | <input type="checkbox"/> 3/20-4/24 | <input type="checkbox"/> 5/1-6/5 |
| Wed. | <input type="checkbox"/> 9/14-10/12 | <input type="checkbox"/> 10/19-11/16 | <input type="checkbox"/> 11/30-12/21 | <input type="checkbox"/> 1/4-2/1 | <input type="checkbox"/> 2/8-3/14 | <input type="checkbox"/> 3/21-4/25 | <input type="checkbox"/> 5/2-6/6 |
| Thur. | <input type="checkbox"/> 9/15-10/13 | <input type="checkbox"/> 10/20-11/17 | <input type="checkbox"/> 12/1-12/22 | <input type="checkbox"/> 1/5-2/2 | <input type="checkbox"/> 2/9-3/15 | <input type="checkbox"/> 3/22-4/26 | <input type="checkbox"/> 5/3-6/7 |
| Fri. | <input type="checkbox"/> 9/16-10/14 | <input type="checkbox"/> 10/21-11/18 | <input type="checkbox"/> 12/2-12/23 | <input type="checkbox"/> 1/6-2/3 | <input type="checkbox"/> 2/10-3/16 | <input type="checkbox"/> 3/23-4/27 | <input type="checkbox"/> 5/4-6/8 |

*4 weeks - \$135

No class the week of 2/25

No class the week of 4/2

6 weeks - \$200

No class 5/28

*5 weeks

Mini-Kickers Soccer Program (Ages 3-4) \$170.00

| | #1 (5 weeks) | #2 (5 weeks) | #3 (5 weeks) | #4 (5 weeks) | #5 (5 weeks) | #6 (5 weeks) | #7 (5 weeks) |
|------|-------------------------------------|--------------------------------------|--------------------------------------|----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|
| Wed. | <input type="checkbox"/> 9/14-10/12 | <input type="checkbox"/> 10/19-11/16 | <input type="checkbox"/> 11/23-12/21 | <input type="checkbox"/> 1/4-2/1 | <input type="checkbox"/> 2/8-3/14 | <input type="checkbox"/> 3/21-4/25 | <input type="checkbox"/> 5/2-5/30 |

No class the week of 3/30

No class the week of 4/3

3 Con Baseball Instructional Clinic - Saturdays (Ages 3 - 8) \$185.00

| Session | Day | Month | Dates | 10:00 - 11:30 am (Ages 3 - 5) | 11:30 - 1:00 pm (Ages 6 - 8) |
|---------|----------|-----------|----------|----------------------------------|---------------------------------|
| 1 | Saturday | November | 5,12,19 | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Saturday | December | 3,10,17 | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | Saturday | January | 7,14,21 | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Saturday | Jan./Feb. | 28,4,11 | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | Saturday | Feb./Mar. | 18,3,10 | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | Saturday | March | 17,24,31 | <input type="checkbox"/> | <input type="checkbox"/> |

Holiday Break Instructional Clinic (Ages 3 - 12) \$250.00

| Dates | 10:00 am - Noon (Ages 3 - 5) | Noon - 2:00 pm (Ages 6 - 9) | Noon - 2:00 pm (Ages 10 - 12) |
|---------------------------------|---------------------------------|--------------------------------|----------------------------------|
| Monday - Friday 12/26 - 12/30 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Mid-Winter Break Instructional Camp (Ages 3 - 12) \$250.00

| Dates | 10:00 am - Noon (Ages 3 - 5) | Noon - 2:00 pm (Ages 6 - 9) | Noon - 2:00 pm (Ages 10 - 12) |
|-------------------------------|---------------------------------|--------------------------------|----------------------------------|
| Monday - Friday 2/20 - 2/24 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Spring Break Hitting & Fielding Camp (Ages 3 - 12) \$250.00

| Dates | 10:00 am - Noon (Ages 3 - 5) | Noon - 2:00 pm (Ages 6 - 9) | Noon - 2:00 pm (Ages 10 - 12) |
|-----------------------------|---------------------------------|--------------------------------|----------------------------------|
| Monday - Friday 4/2 - 4/6 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

DONT FORGET TO ASK ABOUT OUR SUMMER PROGRAMS!

Player Name: _____

DOB: ____/____/____

Address: _____

City: _____ Zip: _____

Email: _____

Home Phone _____ Work Phone: _____



Phone -914-242-1626 | Fax 914-242-1628

Makes Checks Payable to: **ProSwing**

Mail to: ProSwing Baseball Training Center
27 Radio Circle
Mount Kisco, NY 10549

Payment Type: Visa Mastercard Amex

_____ credit card number | _____ exp. date

CONSENT & WAIVER

In consideration of acceptance of my child in the Baseball/Softball Camp outlined above, I hereby for myself, my child, their heirs, executors and administrators waive and release any claim we may have for damages against ProSwing Baseball Training Center (ProSwing Inc.) their officials, officers, employees or representatives, or their successors or assigns for any and all injuries, that may be suffered by my child while or as a result of participating in the above said program.

Signature of Parent" _____ Date : ____/____/____