



GAMERS BASEBALL & SOFTBALL ACADEMY 2022 BASEBALL SKILLS CLINIC

August 8-10

Baxter Sports Complex • 909 48th Street • Fort Madison, IA

Gamers Baseball & Softball Academy will be hosting a Baseball Skills Clinic beginning Monday, August 8th and concluding on Wednesday, August 10th at Baxter Sports Complex, located at 909 48th Street in Fort Madison. The

3-day clinic will be divided into 2 separate age groups (see below) and will feature instruction from Gamers Academy staff, as well as guest coaches and a featured speaker each day. On Wednesday, clinic participants will have the opportunity to play in a live scrimmage game.

Group 1 (Ages 11 & Under) will take place from 9:00–Noon each day, followed by **Group 2 (Ages 12 & Older)** from 1:00–4:00. The cost of the 3-day Clinic is \$125/participant. Pre-Registration is strongly encouraged to ensure the participant receives a clinic t-shirt. Registration will remain open on Monday, August 8th prior to the start of each clinic group. Registration Form *and* payment must be received prior to the start of the clinic.

For more information or to register, please contact Ron Walker at ron.greatriver@gmail.com or Jeff Woodside at BaxterSportsDirector@gmail.com. You can also visit Gamers Baseball & Softball Academy on Facebook or the Baxter Sports Complex website at www.baxtersportscomplex.com.

REGISTRATION FORM

Pre-Registration Deadline: Friday, August 5th

PARTICIPANT INFORMATION

Name: _____ Phone Number: (____) _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Shirt Size: Youth S (6-8) Youth M (10-12) Youth L (14-16) Youth XL (18-20)

Adult S Adult M Adult L Adult XL

PARENT/GUARDIAN INFORMATION

Name: _____ E-Mail: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

I understand that with any sport or activity comes an inherent risk of injury, and that protective equipment does not prevent all injuries to players. With this in mind, I give permission for the above named child to participate in all clinic activities. Furthermore, I do hereby waive, release, absolve, indemnify, and agree to hold harmless Gamers Baseball & Softball Academy, Baxter Sports Complex, and the organizer, sponsors, and/or supervisors, from any claim arising out of any injury to my child.

Signature: _____ Date: _____

Please Mail Check to:
Baxter Sports Complex
P.O. Box 587
Fort Madison, IA 52627