

I.S.T 2009 FALL AFTER SCHOOL BASEBALL CLINICS FOR WESTPORT LITTLE LEAGUE REGISTRANTS

OPEN TO ALL: Kindergarten, 1st/2nd, 3rd, and 4th/5th grade Baseball Players

(Program held at Coleytown Elementary School)

Clinics will focus on supplementing FALL season games and practices with more focused skills development clinics. Each day players will be brought through a series of drills to improve their hitting, fielding, and pitching technique.

Players will also learn baseball running and how to react during game situations.

Kindergarten, 1st/2nd, 3rd and 4th/5th grade baseball programs

Coleytown Elementary School Little League clinics

	<u>Program code</u>		
Kindergarten	CE1 -Tuesday	Sept 8th, 15th, 22 nd , 29 th Oct 6 th , 13 th , 20 th , 27 th	3:45PM to 4:45PM
1 st /2 nd grade Baseball	CE2 -Wednesday	Sept 2 nd , 9 th , 16 th , 23 rd , 30 th , Oct 7 th , 14 th	3:45PM to 4:45PM
1 st /2 nd grade Baseball	CE3 -Friday	Sept 4 th , 11 th , 18 th , 25 th , Oct 2 nd , 9 th , 16 th , 23 rd	3:45PM to 4:45PM
3 rd grade	CE4- Monday	Sept 14 th , 21 st , Oct 5 th , 12 th , 19 th , 26th, Nov 2 nd , 9 th	3:45PM to 4:45PM
4 th /5 th grade Baseball	CE5- Thursday	Sept 3 rd , 10 th , 17 th , 24 th , Oct 1 st , 8 th , 15 th , 22 nd	3:45PM to 4:45PM

Cost: \$250 Each session is limited to 16 players

Important program information

Weather cancellation number: 203-604-0587

Players will be picked up inside Coleytown Elementary School at dismissal by I.S.T.'s staff in a designated location. Each player will need a written note each week giving them permission to participate in the program. Rain cancellations will be made up by extending future classes.

You will receive a confirmation via email.

Make your selections: Keep top portion with dates

Coleytown Elementary Clinics () CE1 Kindergarten Tues \$250 () CE2 1st/2nd Wed \$250

() CE3 1st/2nd Friday () CE4 3rd grade Monday \$250 () CE5 4th/5th Thursday \$250

Last _____ First _____ age _____ grade _____

Street _____ City _____ ST _____ Zip _____

Home Phone _____ email _____

Parent/Guardian Name & Address _____ Phone _____

Check/money order payable to I.S.T.

Mail: I.S.T. Baseball Headquarters, 25 Van Zant St. Unit 3B Norwalk, CT. 06855

Call: Glenn Katz at 203-856-7104 or email: istkatz22@yahoo.com for more information