

# BASEBALL City Capitals

## 13U Developmental Program

**"FIRST YEAR ON THE BIG DIAMOND"**

The 13U Developmental Program offers:

- 6 Week Developmental Program
  - 1 Weekday Practice and 1 Weekend Practice or Game (Day/Time TBD)  
*(depending on number of players)*
- Player Development Program designed by Bill Masse  
*(Current ML Scout for Seattle Mariners)*
- Experienced coaches with advanced baseball knowledge
  - Professional Instruction & Curriculum
- Free Use of Baseball City training facility during fall season
  - Capitals Jersey & Hat
- All practices & games held at East Catholic H.S.

The Baseball City 13U Fall Developmental Program is designed to help ease the transition to the big diamond. The program will follow a professional curriculum designed by current Seattle Mariners Scout Bill Masse. The development schedule will include one practice during the week, and one practice or scrimmage on the weekend. The emphasis of this program will be to develop players to be able to adapt to the big diamond as quickly and easily as possible. Constant instruction throughout practices and scrimmages will help prepare players to understand the differences and changes in the game that the big diamond will bring them.

**Program will run from September 8<sup>th</sup> through October 16<sup>th</sup>.**

**Program Cost = \$199\***

*\*includes Jersey & Hat*

**REGISTER ONLINE!**

*Please cut and mail registration to address below*

PLAYERS'S NAME \_\_\_\_\_ BIRTH DATE \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_\_ **13U BC CAPITALS**

PARENT'S NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE ( ) \_\_\_\_\_ CELL PHONE ( ) \_\_\_\_\_

MASTER CARD/VISA #: \_\_\_\_\_ EXP. DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_ CHECK #: \_\_\_\_\_ CASH: \_\_\_\_\_

I/We hereby authorize Baseball City, LLC. to act in my/our behalf in obtaining appropriate emergency medical treatment for my son/daughter if I/we am/are unavailable to do so myself. In addition my son/daughter realizes sports are competitive and that injuries are part of the game. I/we assume all risks and hazards associated with this participation. I/we do hereby waive, release, absolve and agree to hold harmless Baseball City owners, staff and instructors for any claim arising out of injury to my son/daughter.

Parent Signature

Date

**CHECKS PAYABLE TO BASEBALL CITY**

216 MURPHY ROAD, HARTFORD, CT 06114

[www.baseballcityct.com](http://www.baseballcityct.com)

860/527-CITY