LADY FALCONS SOFTBALL

Spring 2011 ‘Lady Falcons’ Pre-Season Softball Training Academy for Ages 8 - 16

PROGRAM FEATURES
Small and Large Group Instructional Training Activities
Coaching Clinics and Observation Area for Parents

THE PROGRAM
The Dutchess Community College Falcons Softball staff and team are pleased to announce the 8th Annual “Lady Falcons” Pre-Season Softball Training for all players (Age 8 - 16) in the Hudson Valley area. Our program will emphasize development of mechanics in the areas of hitting, fielding, pitching, catching, base running and the “essentials” of team play.

PHILOSOPHY
Our goal is to provide a comprehensive instructional program that emphasizes active participation in a “risk free” environment. We look forward to working with players of all abilities and levels of experience. We are most interested in having our participants grow in all phases of the game within the spirit of teamwork and fair play.

Six, 3-hour sessions
Ages 8 - 16
Saturdays 6:00 PM- 9:00 PM
1/15/11 to 2/19/11

Snow date 3/5/11

FOR MORE INFORMATION:
Contact Coach Chris Rea, (845) 532-2820

FOR REGISTRATION INFORMATION:
Contact the Office of Community Services (845) 431-8910
THE STAFF
Members of the DCC Falcons Softball program, under the direction, supervision and training of the DCC coaching staff, will engage in a practice workout with each of the participants in small groups of four to six players.

TRAINING FACILITY
The Falcon Hall gymnasium facility will be the central location for all workout activities. This area provides space for:
- batting tunnel and live hitting stations to learn softball swing
- batting tee and soft toss instructional areas
- floor space for base running, fielding, pitching/catching
- mirrored facilities for pitching visualization training for beginner and intermediate levels.

PARENT INVOLVEMENT
This program invites parents to be involved through observation of all activities and participation in all instructional lectures and clinics. At times we will have a coaches’ corner where a specific aspect of the game will be covered from a coaching perspective.

TUITION: $130
This includes 3 additional hours of softball instructional training at last year’s fee.

<table>
<thead>
<tr>
<th>Section</th>
<th>Level</th>
<th>Age</th>
<th>Time</th>
<th>Day</th>
<th>Dates</th>
<th>Registration</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>FAL104.10</td>
<td>All</td>
<td>8-16</td>
<td>6:00pm - 9:00pm</td>
<td>Saturday</td>
<td>1/15-2/19</td>
<td>Limit 60</td>
<td>$130</td>
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</tbody>
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CRN #

REGISTRATION: “YOUNG FALCONS” PRE-SEASON SOFTBALL ACADEMY
OFFICE USE ONLY
Initials ___________
DCC I.D. # ____________________________ Date ___________
Last Name __________________________ First Name ___________________ M.I. _____
Street ____________________________________________________________________________________
City / Town ________________________________________________________________________________ State _______ Zip __________________
County _____________________________________________________________________________________
Age _____ Grade _____ Phone (Day ____________________ (Eve.) __________________

Please use one form per registration.

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OFFICE USE ONLY
Initials ___________
DCC I.D. # ____________________________ Date ___________
Last Name __________________________ First Name ___________________ M.I. _____
Street ____________________________________________________________________________________
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County _____________________________________________________________________________________
Age _____ Grade _____ Phone (Day ____________________ (Eve.) __________________

Course #: FAL104  CRN:  Section: 10  Begin Date: 1/15/2011
Course Title 8th Annual “Lady Falcons” Softball Academy Fee $130
Charge Card ____ VISA ____ MasterCard ____ Discover  ____ American Express
Cardholder (Print) __________________________________________________________
Charge Card Number __________________________ Exp. Date _______________
Authorized Signature __________________________ Date _______________

Please list any health problems or medication which you feel instructors should be made aware:

IN CASE OF EMERGENCY: I AUTHORIZE THE RELEASE OF MY SON/DAUGHTER TO BE TREATED BY A LICENSED PHYSICIAN OR HOSPITAL
Signature of Parent or Guardian __________________________

TO REGISTER BY PHONE USING MASTERCARD, VISA, DISCOVER or AMERICAN EXPRESS CALL: (845) 431-8910 OR FAX TO (845) 431-8988

Y:Flyers/FAL104 spring 2011