

# Wednesday Night High School Baseball Pre-Season Workouts

Beginning January 17<sup>th</sup>, Players Dugout staff will hold pre-season work-outs for high school players on Wednesday nights. These workouts will be intensive both offensively and defensively and will give each player an opportunity to improve their skills and gain an edge on their competition preparing for the upcoming season. These workouts will be for five consecutive Wednesday nights taking them through Feb. 14<sup>th</sup>. **If you are participating in Saturday Team Practice you will get a \$20 discount. If you are participating in Saturday Team Practice and have participated in at least two of the last five Functional Training sessions you will get a \$40 discount.**

\*\*Players have the option of choosing between the following two 1 hour workouts each Wednesday for the five week session.

\*\*(must enroll in the same workout(s) each day throughout the five weeks)

**Session 1 - Infielding (6:00 – 6:55 PM)**

**Session 2 - Hitting (7:00 – 7:55 PM)**

**The cost for each 1 hour workout depends on the number of session a player participates in each day throughout the five weeks.**

**1 session / day - \$20.00 per workout = \$100.00 – total for 5 weeks**

**2 sessions/ day - \$17.50 per workout = \$175.00 – total for 5 weeks**

Payments must be made by January 13<sup>th</sup>. Make checks payable to The Players Dugout and drop by The Players Dugout or mail to P.O. Box 406 E-Town Ky. 42702

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### Application

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Grade \_\_\_\_\_ Position \_\_\_\_\_

Parents' Name: \_\_\_\_\_ 2<sup>nd</sup> Position \_\_\_\_\_

P.O. Box 406  
E-Town Ky. 42702

Phone:(270)765-7478  
Fax:(270)765-5169

**Condition of Application (Applications void without signature below):**

I/We, being the parents and/or legal guardians of the applicant, authorize the staff of The Players' Dugout, Inc. and its agents to act for the above named applicant according to their best judgment in any emergency requiring medical attention and, hereby, waive and release The Players' Dugout, Inc., its officers and its staff members from any and all liability for any injuries or illness incurred for the above named applicant while participating in any Players' Dugout Baseball Training Program. Further, I/We claim that the registrant has had a physical examination in the past year and has been found fit for all physical endeavors.

Signature of parent and/or guardian: \_\_\_\_\_

Date: \_\_\_\_\_