

# CHARLESTON BASEBALL ACADEMY PITCHING CLINIC "Mental Toughness & Preparation"



Saturday, March 20th, 2010  
1:00 pm - 3:00 pm

Clinic instruction from:  
**Stan Kowalski – CBA Pitching Instructor**

\$35.00 per player – non member  
\$25.00 per player – member

### CLINIC INFORMATION

**CHARLESTON BASEBALL CLINICS** are designed to provide specialized skill teaching and development to youth of the greater Charleston area between the ages of 8 and up. Through the CBA Training, local youth have the opportunity to learn valuable baseball fundamentals. These fundamentals will improve their knowledge and understanding of the game and their quality of individual play, as well as their personal confidence and athleticism. Our mission is to instruct players with today's proper skills while encouraging them to have fun and meet new people through our facility.

### CURRICULUM

**The CBA Mental Pitching Clinic** is designed to teach the necessary skills for today's pitchers. We will be discussing the importance of mental toughness and preparation in order to be successful on the mound in highly competitive situations. Our clinic will demonstrate simple routines for pitchers to use to build confidence and success. This clinic is for pitchers of all ages!

**For more information or to register, please call CBA at 843-851-7187 or email  
stan@charlestonbaseballacademy.com**

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Players Name: \_\_\_\_\_ Age: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I HEREBY WAIVE, RELEASE AND FOREVER DISCHARGE THE CHARLESTON BASEBALL ACADEMY AND IT'S STAFF FROM ANY LIABILITY OR CLAIMS ARISING OUT OF ANY LOSS, PERSONAL INJURY OR PROPERTY DAMAGE THAT MAY OCCUR DURING PARTICIPATION IN THE CLINIC. I AM AWARE OF THE RISKS OF PLAYING BASEBALL AND VERIFY THAT MY SON/DAUGHTER IS IN GOOD HEALTH AND IS ABLE TO PARTICIPATE IN ALL CLINIC ACTIVITIES. IN CASE OF AN EMERGENCY I GRANT PERMISSION FOR MY CHILD TO BE GIVEN TREATMENT AT A LOCAL HOSPITAL.

\_\_\_\_\_  
SIGNATURE OF PARENT

\_\_\_\_\_  
DATE

CBA Pitching Clinic  
Mental Pitcher, March 20, 2010  
843-851-7187

Please return this portion with your payment. Thank you.

MAKE CHECKS PAYABLE AND  
MAIL TO:  
Charleston Baseball Academy  
392 E 5<sup>th</sup> North Street  
Summerville, SC 29483  
**(NO REFUNDS)**

**www.charlestonbaseballacademy.com**