

# CARDINAL FIELD HOCKEY CLINIC & 7 v 7 PLAY

Hosted by the Wesleyan University Women's Field Hockey Team at the Freeman Athletic Center  
www.wesleyan.edu/athletics

## Who:

For girls entering grades 5-12.

## What:

Five indoor dates. Each session will be two hours. Players will be coached and refereed by Wesleyan coaches and players. Within drills and small game play, participants will develop skills and game concepts. If weather permits the turf field will be used.

## Where:

Freeman Athletic Center, Wesleyan University  
161 Cross Street, Middletown

## When: January 2010

Sunday, January 3 1-3 PM  
Sunday, January 10 1-3 PM  
Sunday, January 17 1-3 PM  
Saturday, January 23 7-9 PM  
Saturday, January 30 7-9 PM

\*\*\*\* **No Snow Dates** \*\*\*\*

## Cost:

**\$100 (no discounts available)**

All money benefits the Wesleyan University Women's Field Hockey team.

## What to Bring:

**Mouth guards and goggles are mandatory**

Cross trainers/indoor shoes, sticks, goalie equipment, water bottle

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### --Application Form--

Name: _____	Check One:
Address: _____	Youth: 5 <sup>th</sup> -8 <sup>th</sup> Grade _____
City/State/Zip: _____	High School: 9 <sup>th</sup> -12 <sup>th</sup> Grade _____
Daytime Phone: _____	High School _____
CellPhone: _____	Year of HS Graduation: _____
Email Address: _____	Primary Position: _____
Date of Birth: _____	US Field Hockey Membership #: _____

### Waiver of Liability

I agree to assume full responsibility for myself, and those in my charge while participating in the Wesleyan University "Field Hockey Clinic & 7 v 7 Play." To the best of my knowledge, I or those in my charge do not have any physical illness or condition that would prevent participation in the activities that are associated with this event. I will not hold Wesleyan University, including its staff involved in this event liable or responsible for any injuries or personal mishaps that should occur to me while I am at this event or in and around the Freeman Athletic Center.

Signature of Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

(If under the age of 18 years old waiver must be signed by Parent/Guardian in charge)

### **RESERVE YOUR SPOT by mail, email, phone, or fax:**

Women's Field Hockey Office  
Wesleyan University - Freeman Athletic Center  
Middletown, CT 06459

e-mail to: pklechaporte@wesleyan.edu  
860.685.2899 phone  
860.685.2691 fax

**Please Make Checks Payable to: WESLEYAN FIELD HOCKEY**