

ALL LEVELS OF PLAY POSITION SPECIFIC SKILL WORK OFF-FIELD TRAINING BUILD GREAT WORK ETHIC



FALL BASEBALL

AT THE ZONE...

**REGISTER NOW AT
LAST YEAR'S PRICING!**



Rookie
AGES 5-7



Instructional
AGES 7-9 AND 10-12



Competitive
AGES 9/10 11/12 13/14 15/16



16 Up Wood Bat
HIGH SCHOOL



Jr./Sr. Elite Team
TRYOUT ONLY-HIGH SCHOOL



MENTAL TRAINING INDOOR HITTING STRENGTH, SPEED AND AGILITY WORKOUTS

TEAM REGISTRATION FORM

Partial Team Special Rates

A partial team consists of 6 or more players. Please use registration of back.

Each Player will receive 10% off of their league.

Full Team Special Rates

- Instructional League (10 Players = full team)
- *Competitive League (13 Players = full team)
- *16 Up Wood Bat League (13 Players = full team)
- * By paying Full Team Price, you can fill your roster with as many players as you wish up to 13)

REGISTRATION SIGN-UP PRICE FOR LEAGUES	INDIVIDUAL	PARTIAL TEAM	FULL TEAM
INSTRUCTIONAL LEAGUE <input type="checkbox"/> 7-9 DIVISION <input type="checkbox"/> 10-12 DIVISION	\$ 180	\$162.00 PERPLAYER	\$1500
COMPETITIVE LEAGUE <input type="checkbox"/> 9-10 DIVISION <input type="checkbox"/> 11-12 DIVISION <input type="checkbox"/> 13-14 DIVISION <input type="checkbox"/> 15-16 DIVISION	\$ 200	\$184.50 PERPLAYER	\$ 2400
<input type="checkbox"/> 16 UP WOOD BAT LEAGUE INCLUDES FREE WOOD BAT	\$ 230	\$207.50 PERPLAYER	\$ 2700

CALL (402) 398-1238 TO REGISTER OR SEND FORM TO STRIKE ZONE 2900 SOUTH 110th STREET OMAHA, NE 68144 or FAX (402) 399-2019
DEADLINE DATE TO REGISTER AS FULL OR PARTIAL TEAM IS AUGUST 15.

- FREE PRIVATE TEAM CAMP WITH STRIKE ZONE INSTRUCTOR (7-12 YEAR OLD TEAMS ONLY)
- FREE PRIVATE TEAM HITTING VIDEO ANALYSIS (13 AND UP TEAMS ONLY)
- FREE 5 HOURS IN TUNNEL AREA TO HOLD PRACTICE (BEFORE DEC. 31)
- FREE WEEKLY HITTING CIRCUITES WITH SZ STAFF
- FREE WEEKLY FLAT GROUND BULLPEN SESSIONS WITH STRIKE ZONE STAFF
- FREE COACH'S HANDBOOK/PLAYBOOK FOR HEAD COACH
- FREE ALL SKILLS & PITCHING/CATCHING CLINICS
- SPECIAL DISCOUNTED ON TEAM EQUIPMENT

Coach: _____
 Email: _____
 Address: _____ City: _____ ST: _____ Zip: _____
 Home #: _____ Cell#: _____

PAYMENT METHOD

Cash Check Visa MC Disc AMEX

Exp Date _____ 3 digit V-Code _____

Signature: _____



PLEASE FILL OUT PLAYER REGISTRATION FORM ON BACK

