



# Robbinsdale Community Play Ball Clinic

**Free!**

**Youth Ages: 7-14  
Tuesday, July 18, 2017  
9:30 am-3:00 pm**

**Free!**

Please join the Cal Ripken, Sr. Foundation along with the City of Robbinsdale Recreation, Parks & Police Departments, the Metro Transit Police Department, and the Minnesota Twins for the Robbinsdale Community Play Ball Clinic!

## Location

**MLB Twins All Star Field, Lee Park**  
3700 Lee Ave N  
Robbinsdale, MN 55422

**Rain Location: Elim Lutheran Church**  
3978 West Broadway Ave  
Robbinsdale, MN 55422  
*Call 763-531-1276 for updates that day.*

### Participants attending receive:

- Under Armour t-shirts and drawstring backpacks to first 150 registered - **must attend event to receive gear**
- Minnesota Twins Baseball clinic with players and TC Bear
- Live Performance by country music artist, Matt Stillwell
- Lunch provided by the Cal Ripken, Sr. Foundation
- Ice cream and giveaways from the Minneapolis Bike Cops
- Chance at Inflatable obstacle course, football, soccer, and Quickball

### TO REGISTER:

Complete this form: mail or drop off at Robbinsdale City Hall, 4100 Lakeview Ave N, Robbinsdale, MN 55422

OR

Register online by following the online registration link found at [www.robbinsdalemn.com](http://www.robbinsdalemn.com)

*Register by July 11, 2017. Will accept registration after date only if space is available.*

## YOUTH FIELD DAY REGISTRATION & WAIVER FORM

Register online or print clearly; drop off or mail this form to City of Robbinsdale, 4100 Lakeview Ave. N, Robbinsdale MN 55422

Youth's Name \_\_\_\_\_ Birthday \_\_\_\_\_ Gender \_\_\_\_\_

Contact Person \_\_\_\_\_ Contact's email: \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Cell) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

### Liability Waiver:

The undersigned acknowledges that recreational and sports programs involve inherent risks of personal injury. It is agreed that participation in the program is voluntary and at the participant's sole risk. The sponsoring cities shall not be liable for any claims, demands, injuries or damages, whatsoever to the participant or participant's property arising out of the participant's participation in the program. On behalf of the participant, the undersigned releases and discharges the City, its employees, volunteers or agents from all such claims, demands, injuries or damages, except those directly caused by the gross negligence of the City, its employees or agents.

Parent or Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_