**PBI's Squirts program is designed for the "rookie" baseball player. The program explains the fundamentals of hitting off of a tee, throwing and catching, fielding batted balls and running the bases. Squirts is an organized non-competitive series designed to teach players and their parents the role of baseball in a young one's life. Parents learn side-by-side with their future all-star players. Doug Cinnella, founder of PBI says, "This is a once-in-a-lifetime opportunity to be with your child as they establish stronger motor skills and develop a great sense of accomplishment. To be able to share these special moments with your child is priceless."**

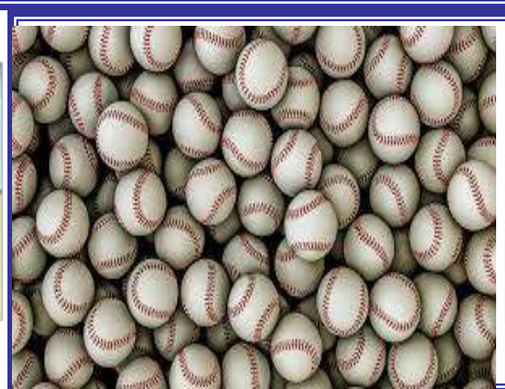
## Topics of the Squirts Program Include...

**THROWING & CATCHING...** Throwing & Catching is one of the most crucial skills in the game of baseball. PBI will teach players to throw with proper mechanics in order to not only make good throws, but also create a good base for arm strength in the future. Players will also catch various types of throws which will enhance their hand-eye coordination in order to develop good catching skills.

**HITTING...** Basic skills are taught including initial set up, grip, swing plane and overall swing mechanics. We break down the hitting mechanics step-by-step. Our hitting stations, when performed properly, create positive muscle memory, effectively creating good habits.

**FIELDING...** Learn the basic fielding skills that are essential to becoming a good fielder. Specific drills are designed to create confidence and build a solid fielding foundation. Your child will field various types of ground balls & and fly balls. Our step-by-step approach will have your child ready to play with confidence.

**BASERUNNING & SLIDING...** A player with good baserunning skills is always a plus. Learning baserunning properly at a young age will give you great advantages, and put you ahead of the pack as you get older. We will also teach your children the proper sliding techniques. The patented Slide-Rite makes learning to slide safe, fun and easy.



# Dates & Times

**Program meets 1 hr once a week for 4 weeks**

Unless otherwise noted

| | | | |
|---|---|---|---|
| **SEPTEMBER 2026 – SQUIRTS PROGRAMS** | | | |
| **401** | Wednesday | Sept. 9, 16, 23, 30 | 3:00-4:00PM |
| **OCTOBER 2026 – SQUIRTS PROGRAMS** | | | |
| **402** | Wednesday | Oct .7, 14, 21, 28 | 3:00-4:00PM |
| **NOVEMBER 2026 – SQUIRTS PROGRAMS** | | | |
| **410** | Wednesday | Nov. 4, 11, 18, 25 | 3:00-4:00PM |
| **DECEMBER 2026 – SQUIRTS PROGRAMS** | | | |
| **420** | Wednesday | Dec. 2, 9, 16, 23 | 3:00-4:00PM |
| **JANUARY 2027– SQUIRTS PROGRAMS** | | | |
| **430** | Wednesday | Jan. 6, 13, 20, 27 | 3:00-4:00PM |
| **FEBRUARY 2027– SQUIRTS PROGRAMS** | | | |
| **440** | Wednesday | Feb. 3, 10, 17, 24 | 3:00-4:00PM |
| **MARCH 2027– SQUIRTS PROGRAMS** | | | |
| **450** | Wednesday | Mar. 3, 10, 17, 24 | 3:00-4:00PM |
| **APRIL 2027 SQUIRTS PROGRAMS** | | | |
| **460** | Wednesday | 3/31, 4/7, 14, 21 | 3:00-4:00PM |
| **MAY 2027– SQUIRTS PROGRAMS** | | | |
| **470** | Wednesday | 4/28, 5/5, 12, 19 | 3:00-4:00PM |
| **JUNE 2027– SQUIRTS PROGRAMS** | | | |
| **480** | Wednesday | 5/26, 6/2, 9, 16 | 3:00-4:00PM |

Squirts For Players 3, 4 & 5


Professional Baseball Instruction, Inc.
1300 Rt 17 North, Ramsey, NJ 07446
1-800-282-4638
www.baseballclinics.com


# Squirts

## For Players 3, 4, & 5 Years Old

Boys & Girls & Their Parents

PROFESSIONAL BASEBALL INSTRUCTION

(201) MAGAZINE'S BEST OF BERGEN 2015

www.BASEBALLCLINICS.COM

# Registration, Payment & Agreement

Squirts 2026/27

Name: _____ DOB.: _____

Address: _____

City: _____ State: _____ Zip: _____

Fathers Name: _____ Mothers Name: _____

Fathers Cell: _____ Mothers Cell: _____ Home Phone: _____

EMail(s): _____

Member Price:
4 Week Pgm: **$143.99**

Regular Price:
4 Week Pgm: **$159.99**

## I Will Attend The Following Squirts...

Squirts #_____ + $_____

Squirts #_____ + $_____

Squirts #_____ + $_____

**TOTAL DUE:** _____

*Clinic fee includes Non-refundable registration fee of $50.00 per clinic*

NOTE: A 3% convenience fee will be charged to all credit card transactions. You

## Method of Payment

Accepted Methods of Payment...

- ☐ Check *(made out to cash)*
- ☐ Cash
- ☐ MC
- ☐ Visa
- ☐ AMEX

Credit Card #: _____

Exp. Date: _____ CVV: _____


1300 Route 17 North, Ramsey, NJ 07446
1-800-282-4638 * Fax: 201-760-8720
www.BASEBALLCLINICS.COM


## Signature & Policy Agreements

**Refund Policies–** There are NO cash refunds. Any student missing camp or clinic time - regardless of the reason - will be issued a credit voucher minus a $50.00 administrative fee. Vouchers have no expiration date, and can be used toward future PBI clinic or camp programs.

**Make-Up Time–** You will be expected to attend the sessions you signed up for. PBI can not guarantee the ability to accommodate changes made after the program has begun. Make-ups will not be provided for missed class time unless the missed class time is due to the State of NJ having declared an emergency.

**Weather–** All programs will run according to schedule unless there is a state of emergency weather situation declared by the State of NJ.

**Hold Harmless–** I hereby acknowledge that participation in any program provided by Professional Baseball Instruction, Inc. (PBI) involves an inherent risk of physical injury and hereby assume all such risk and do hereby release, forever discharge, and hold harmless, PBI and all its employees and agents thereof from any and all known liability no matter the nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen body and personal injuries, damage to property, and the consequences thereof, resulting from the registrant's participation in or involvement with this clinic, including any failure of equipment or defect in the premises. I also hereby certify that the participant is in good physical condition and can partake in the daily schedule of events. In the case of an emergency, I grant permission for the participant to be given treatment by a local hospital. Any photographs taken at the camp are subject to be used in the brochure in future years and can possibly be used for advertising the camp. I hereby state that I am the legal guardian of the participant.

**By affixing my signature below I confirm that I have read and agree to the policies and Hold Harmless Agreement stated above.**

Signature: _____ Date: _____