



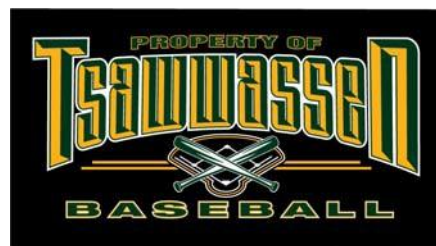
BIG LEAGUE EXPERIENCE

Presents

2015 BLE "SPRING TRAINING" PLAYERS CLINIC

Ladner, B.C.

March 24th to 27th



Instructors Marty Lehn, Former Canadian Olympic Team Coach and MLB scout along with former Colorado Rockies pitcher Brent Crowther, invite players 9 to 13 yrs. to come out and get prepared for the 2015 season. Join Marty, Brent & Chris for a quick paced four days of drills and coaching designed to get you ready for the up and coming season. The Spring Training Super Clinic will be held from **March 24th to 27th** at the **West gym of Delta Senior Secondary in Ladner, B.C.** The **BLE SPRING TRAINING Player's CLINIC** has limited space so please do not delay and sign up today.



INSTRUCTORS

Marty Lehn—Owner and Director of the BLE Camps and Tournaments, Marty is a Scout for the Philadelphia Phillies and coached the Canadian Olympic Team at the 2004 Olympic games held in Athens, Greece. Marty has been with Team Canada for 15 years.



Brent Crowther—

Canadian National Team pitcher and former pitcher for the Colorado Rockies. Brent works with many different organizations throughout the year and is now the pitching coach for the North Delta Blue Jays of the BCPBL.



Chris Strain—Former pitcher at Shoreline college in Seattle, Wa. and pitching coach at City College of San Francisco and Pierce College in Tacoma, Wa

Player Registration

Player Name: _____

Contact number: _____

Email address: _____

Medical Card #: _____

SPRING TRAINING SUPER CLINIC Cost (4 Days)

____2002 - 2005 Birth year 9:15 am to 11:45am Hit/Field/Throw \$ 175 (taxes included)

[**CLICK HERE**](#) to register online for the **2015 BLE Spring Training Super Clinic**.

Or Mail cheque to: Big League Experience Baseball 14836 Thrift Ave White Rock, B.C. V4B 2J7

Must register by March 15 to receive a camp T- Shirt : Please check for shirt size: ____YM,____YL,____S,____M,____L

Waiver: I give permission for my child to participate in the "BIG LEAGUE EXPERIENCE" PLAYERS CLINIC and release all BLE personnel and guest instructors from any LIABILITY while in attendance at the clinic.

Signature: _____ Date: _____

For additional CLINIC information :

mail@bigleagueexperience.com

OFFICE— 604-531-9916