

# 2018 ORIOLE SOFTBALL CAMP

**WHO:** Any girl registered to play in AGSI 11U or 14U division this summer

**WHEN:** April 21, 2018  
9:00a-1:00p

**WHERE:** AGSI Fields

**WHAT TO BRING:** Glove, cleats, jacket and tennis shoes (in case of inclement weather)

**COST:** \$30 (bring form and payment day of camp; check, cash or debit/credit card accepted)

**COACHES:** Jamie VanDever  
Casey Penner  
Rhett Mallon  
Brooke Heumann

**ABOUT THE CAMP:** Campers will receive instruction in the fundamentals of softball. Emphasis will be on individual skills, team play and having fun!

All participants will receive a camp t-shirt.

**PARENTS**—If you have any questions about the camp or registration information contact Coach VanDever at [jvandeever@usd402.com](mailto:jvandeever@usd402.com)

**NAME** \_\_\_\_\_

**AGSI DIVISION** 11U \_\_\_\_\_ 14U \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_

**PARENT/  
GUARDIAN** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**E-MAIL** \_\_\_\_\_

**EMERGENCY CONTACT:**

**NAME** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**T-SHIRT SIZE—Circle one:**

YS YM YL AS AM AL AXL

**SCHOOL ATTENDING**

\_\_\_\_\_

## PLEASE READ AND SIGN MEDICAL WAIVER/RELEASE FORM:

**RELEASE OF LIABILITY**—In consideration of the AHS Oriole Softball Camp allowing the camper to participate, I hereby assume all risks of her personal injury that may result from physical activity. As parent/guardian, I do hereby release Jamie VanDever, Casey Penner, Rhett Mallon, and Brooke Heumann, as well as all instructors and participants in the Camp from all liability, including claims and suits at law or inequity, for injury, which may result from the student taking part in the Camp.

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

\_\_\_\_\_  
Date

**MEDICAL AUTHORIZATION**—I do hereby affirm that the applicant is in good health and suffers from no illness, disability or condition that requires the taking of medication on a regular basis unless that condition is disclosed and approved. Furthermore, I have no knowledge of any reason that the applicant cannot participate in vigorous activity. I hereby authorize and give my consent to Jamie VanDever, Casey Penner, Rhett Mallon, and Brooke Heumann, or any licensed physician or athletic trainer to perform upon or administer, without prior consent, any reasonable, necessary medical treatment to:

\_\_\_\_\_  
Participant's Name

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

\_\_\_\_\_  
Date