

# BULLDOG SOFTBALL

## Skills Camp



Hosted by the BULLDOG SOFTBALL TEAM and COACHING STAFF  
Inside at Pershing Arena located at the Truman State University campus

### SATURDAY, January 20, 2018

<u>Age</u>	<u>Time</u>	<u>Cost</u>	<u>Camp</u>
GRADES 5 <sup>TH</sup> -12 <sup>th</sup>	12:00 PM – 3:00 PM	\$50	Skills Camp

Bring tennis shoes, dress appropriately, bring a helmet, bat, glove, catching equipment if you are a catcher to camp.

You can register with this form or online at:

<https://register.myonlinecamp.com/camp.cfm?sport=3&id=108728>

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## **BULLDOG SOFTBALL PROSPECT CAMP**

### **Registration form due January 20, 2018**

#### **Parent/Guardian Waiver – MUST be signed prior to participation!!**

I, parent/guardian of the below named participant, authorize the Bulldog Softball Camp Staff to obtain medical care or treatment for the named participant in the event of a medical emergency or if a non-emergency treatment is required and I cannot be reached to provide consent. I release the Bulldog Softball Camp Staff from all claims resulting from illness, injury, accident or disease sustained by named participant thereby permitting named participant to participate in the Bulldog Softball Camp, she being of good health for such activity.

Participant name (print) \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Parent/guardian (sign) \_\_\_\_\_ Date \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Emergency/Cell Phone \_\_\_\_\_

Email \_\_\_\_\_ Shirt size \_\_\_\_\_ Position(s) \_\_\_\_\_ / \_\_\_\_\_ Paid \_\_\_\_\_

Please make checks payable to Truman State University Softball Camp. Send the above form along with a check for the appropriate amount to the following address:

Erin Brown- Softball  
Truman State University  
Pershing Building 313 A  
100 E. Normal  
Kirksville, Mo. 63501

Please contact Coach Brown with any questions: Phone: 660-785-4343, Email: [ebrown@truman.edu](mailto:ebrown@truman.edu)