



CLARENDON COLLEGE SOFTBALL PROSPECT CAMP

October 2, 2016

1:00– 5:00 pm

Clarendon College Softball Field

High School and Transfer Athletes Only

\$ 45 Pre-Registration (Until Sept. 26th)

\$ 50 Late –Registration and Walk-Ups

***Registration and Waivers available online!**

For more information, contact Shanna Smith at
386-589-6889 or shanna.smith@clarendoncollege.edu





2016 Prospect Softball Camp

DATE: October 2, 2016

TIME: 1:00 - 5:00pm

LOCATION: Clarendon College Softball Field

1122 College Drive

Clarendon, TX 79226

AGES: High School Years (2017, 2018, 2019, 2020)

COST: \$45 (Pre-Registration Until September 26th)

\$50 (Walk-Ups or After Pre-Registration Date)

(Checks can be made out to Clarendon Softball)

Registration will be 30 minutes before the clinic

Personal Waiver must be filled out as well before participation.

Please RSVP your spot in the clinic before Sept. 26th

Walk-ups are welcomed, but a \$5 late fee will be added.

Each camper must bring their own equipment.

Our mission at all of our camps and clinics is to provide the most in-depth, detailed all around softball experience. Our softball camps and clinics at Clarendon will emphasize fundamental and advanced instruction that will allow young softball athletes the most comfortable and content setting to reach their maximum potential. The clinic will consist of infield, outfield, pitching, catching, and hitting instruction. There will also be a mental toughness session along with video analysis. Pending on numbers we will have live games the last hour and a half of clinic.

***To RSVP your spot in the clinic and for any additional questions, please contact Shanna Smith:
386-589-6889/shanna.smith@clarendoncollege.edu ***

Name: _____

Position: _____

Address: _____

Phone: _____ Age: ____ E-Mail: _____

Emergency Contact: _____ Phone: _____

**All Payment can be sent to: Clarendon College
Attention: Shanna Smith (Softball Office)
1122 College Drive
Clarendon, TX 79226**

Clarendon College Prospect Softball Camp

Release and Waiver Liability

All players must have a signed waiver before participating in the camp. All waivers must be handed in at registration or completed and emailed to Shanna Smith before arriving.

Participant Name: _____ **Email:** _____

Emergency Contact: _____ **Phone:** _____

ASSUMPTION OF RISK / LIABILITY RELEASE:

I do hereby release the Clarendon College Board of Regents, Clarendon College, the Clarendon College Softball Program and their officers, employees and agents, from all liability for personal injury or property damage which result from causes beyond control of, **and which may occur either with or** without the fault or negligence of, Clarendon College, and its employees, agents, or officers.

CONSENT FOR TREATMENT OF A MINOR:

I, the undersigned, authorize the staff of Clarendon College to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive and release the camp, its staff, and coaching personnel, its successors, officers, agents and employees from any and all liability for any injuries or illness incurred while at a camp/clinic. I have no knowledge of any physical impairment that would be affected by the above camper's participation in the camp/clinic.

Media Release:

I hereby grant full permission to all persons associated with this event to use any photographs, video tapes, motion picture recordings or any other record of this event involving the participant for publicity and promotional purposes.

I have read and agree to the terms of the "Assumption of Risk/ Release from Liability, Consent for Treatment of a Minor, and the Media Release."

Parent/ Legal Guardian Printed Name **Phone Number**

Parent/ Legal Guardian Signature **Date**

Participant Signature **Date**