

Colorado State University-Pueblo

PACK SOFTBALL WINTER HITTING
CLINIC
APPLICATION

Name: _____

Age: _____

Address: _____

Telephone: _____

Cost:

Registration.....\$30

Total Fees enclosed: _____

T-Shirt Size: Please indicate what size below

S M L XL



2011 PACK SOFTBALL WINTER HITTING CLINIC
Attn: Coach Showalter, Head Softball Coach
2200 Bonforte Blvd.
Pueblo, CO 81001

CSU-Pueblo

2011 PACK WINTER HITTING CLINIC



December 17, 2011

Please register online at www.packcamps.com

A Message from Coach Showalter

Participating in our softball camp is an opportunity to learn specific fundamentals and mental prep for the game. CSU-Pueblo's clinic will focus on hitting and mental training necessary to excel. We will help develop a winning work ethic as well as create a wiliness to be coachable and learn from experienced coaches and players. Providing campers with the opportunity to reach their potential and increase their knowledge of the game is what CSU-Pueblo's winter hitting clinic is about.

Sincerely,
Coach Shane Showalter

Camp Features

In this three hour hitting clinic, you will learn many of the basic fundamentals of hitting used by the Colorado State University-Pueblo women's softball team. You will also learn elite athlete mental game strategies and drills to perfect your hitting. Camp staff includes members of the CSU-Pueblo Coaching Staff and Softball Team.

Camp Information

December 17, 2011

-1:00-4:00 pm

-Register online at www.packcamps.com

-Fee is \$30

What to Bring

Athletes will need:

-Bat (if you own one), batting helmet, proper shoes, water or sports drink, and a ready to learn attitude.

Eligibility

Ages 10 and up

-Campers will be grouped by age level

Location

PACK SOFTBALL INDOOR ACADEMY
(Livestock Pavilion at Fairgrounds)

For more information contact Coach Showalter at 719-549-2767.

Registration Form

Warning Statement & Waiver and Release

Participating in softball camps requires an acceptance of risk of injury. Colorado State University-Pueblo has taken reasonable precautions to minimize the risk of significant injury by providing competent coaching and instruction, well-maintained equipment and facilities, proper conditioning and good medical care.

The chances of an athlete sustaining a catastrophic sports injury are extremely remote, yet understand that serious injuries can happen to anyone. Participation in your sport could result in a complete or partial paralysis, brain damage, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons, and other aspects of the musculoskeletal system, and serious injury or impairment to other aspects of your body, general health and well being.

EACH ONE OF YOU RISKS BECOMING TRAGICALLY INJURED. With this understanding, the undersigned do hereby WAIVE and RELEASE Colorado State University - Pueblo, faculty and staff, from all liability, arising out of any sickness or injury, including death, that may occur while participating in a sports camp

NOTE: All persons under the age of eighteen (18) are required to have a parent or guardian complete this form as a means of saving precious time in the unlikely event of the necessity for medical treatment while attending softball camp.

X _____
Parent/Guardian Signature Date

Medical Information

Dr. Name: _____ Dr. Phone: _____
Medical Insurance Provider: _____

I authorize camp staff to act as my agent in a medical emergency and waive all claims of liability.

X _____
Parent/Guardian Signature Date