



Winter Instructional Camps
Whitworth University Fieldhouse
January 16–17, 2010



Saturday, January 16

Join the Whitworth softball coaches and players for a session of offensive skills instruction: hitting, bunting/slapping, base running, and game strategy. Grades 4–7, 9 am to 12:30 pm; grades 8–12, 1:30 to 5 pm. \$40 participation fee includes a Nike T-shirt – the same worn by Whitworth softball players!

Sunday, January 17

Join Whitworth pitching coach and former Virginia Tech pitcher Ashley Thatcher for an afternoon of pitching instruction! Grades 4–7, or older beginners, noon to 2 pm; grades 8–12, or advanced 7th graders, 2:30 to 4:30 pm. \$30 participation fee also includes the Nike T-shirt. Campers attending both days of camp can deduct \$5 from their fees if only one shirt is desired.

Please fill out the following registration form and mail to: Whitworth Softball, 300 W. Hawthorne Road, Spokane, WA 99251. We will accept the first 30 paid and registered campers for each of Saturday's sessions and the first 20 for Sunday's sessions. We accept personal checks, made out to Whitworth Softball, or credit card payment. Questions? Please call or email Head Coach Joe Abraham @ 509.777.4397 or jabraham@whitworth.edu

Registration

Name of Camper _____

Name of Parents _____

Address (street, city, state, ZIP) _____

Phone Number _____

Email Address _____

School and Grade Level _____

Adult or Youth Size T-Shirt _____

Form of Payment MasterCard Visa

Credit Card Number _____

Name on Card _____

Expiration Date _____

In consideration of the acceptance of this application for the WHITWORTH SOFTBALL CLINIC, I am aware of and understand the potential dangers of participating in contact sport activities. I understand that catastrophic injury or accident can occur through participation in softball, and I freely and voluntarily assume all such risks and consent to my child's participation in the clinic.

I, intending to be legally bound hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims that I may have now or in the future against Whitworth University and its representatives, employees, respective agents, and/or assignees, for all damages which may be sustained and suffered in connection with my or my child's association with any portion of this clinic or related activities, and which may arise out of my or my child's traveling to or returning from camp. I know of no medical or physical problems that may affect my child's ability to participate safely in this clinic.

I hereby give my consent to the camp staff to attend to any health problems or injury my child may incur while attending this clinic. Further, I give my consent for medical treatment and permission to the attending physician to hospitalize, secure proper treatment and order injections, anesthesia, or surgery for my child. I accept full responsibility for the cost of any charges in connection with my child's attendance at this clinic.

I certify that my/my child's insurance company's name and active health insurance policy number are _____

By signing this form, I acknowledge that I have read this waiver-and-release form and that I understand all of its terms. I sign this release voluntarily and with full knowledge of its significance.

Parent or Guardian:

Name _____

Signature _____

Date _____

We accept personal checks, made out to Whitworth Softball, or credit card payment.

Questions?

Please call or email Head Coach Joe Abraham @ 509.777.4397 or jabraham@whitworth.edu.