



Westside High School Lady Wolves Softball Camp

When: June 6-8

Time: Ages 5-8 : 8:30 am – 10:00 am

Ages 9-13 : 10:30 am – 12:30 pm

Where: Westside High School softball field

Cost: \$75 per child. Group discount of \$50 per child.

The Westside Lady Wolves softball camp will focus on the fundamentals of pitching, catching, defense, offense, slapping, base running, and teamwork. All this and more will be featured in this jam packed, fast-paced softball skills camp. Camp staff will provide coaching for each player's needs and expectations. Camp staff will be made up of the Westside coaches as well as former Westside players and current college athletes. Come join us as we prepare for the future of the Westside Lady Wolves Softball Program! All participants will receive a camp T-shirt as well as have the chance to be awarded camper of the day!

Please fill out and return this page to Coach Parker via email or physically to Westside High School. If you have any questions please email Coach Parker.

Head Coach Shea Parker – sparke12@houstonisd.org

Make checks payable to: Shea Parker

Mail to: Westside High School
c/o Shea Parker
14201 Briar Forest
Houston, TX 77077

Registration Form – Please complete and return by May 30, 2016

Westside HS Softball camp June 6-8 – please check the one your child will be attending.

_____ Ages 5-8

_____ Ages 9- freshman

Shirt Size:

Child S____ M____ L____ XL____

Adult S____ M____ L____ XL____ XXL____

Name: _____

Age: _____ Grade: _____

Address: _____

City: _____ State: _____ Zip: _____

Parent or Guardian name: _____

Email: _____

Phone: _____

Please fill out and return this page to Coach Parker via email or physically to Westside High School. If you have any questions please email Coach Parker.

Waiver and Release:

In consideration of my daughter participating in softball camp, I, intending to be legally bound, do hereby, for myself, my heirs, executors, and administrator, waive and release, and forever discharge any and all rights and claims for damages which may be sustained or suffered by me in connection with, or participation in, and for arising out of my child or heir participating in softball camp. The camp director has my permission to seek medical attention for my child, and I grant permission for the implementation of appropriate medical treatment in the event of injury or sickness.

Parent/Guardian Signature and Date:

Name: _____

Date: _____