



SOFTBALL

SUMMER PROSPECT SKILLS CAMP

OCTOBER 1, 2017

1:30PM-6:00PM

WALLACE STATE SOFTBALL COMPLEX

COST: \$85 (IF REGISTERED BY SEPTEMBER 29), \$95 (AFTER SEPTEMBER 29)

LIMITED SPACE SO REGISTER NOW!

7TH GRADE & UP

DON'T MISS YOUR OPPORTUNITY TO SHOW-OFF YOUR SKILLS IN FRONT OF THE 2017 ACCC CHAMPIONS!

NAME: _____

PHONE: _____ EMAIL: _____

SCHOOL: _____ AGE: _____ GRAD YEAR: _____

**STILL HAVE QUESTIONS?
CONTACT COACH DAUGHERTY AT:
AJ.DAUGHERTY@WALLACESTATE.EDU**

**PLEASE SUBMIT REGISTRATION/PAYMENT TO:
WALLACE STATE SOFTBALL
P.O. Box 2000
HANCEVILLE AL, 35077-2000**

Waiver of Liability and Hold Harmless Agreement - To the best of my knowledge, my child is in good physical condition and I am not aware of any physical infirmity, which would place my child at risk to participate in any way with the camp's activities. I am fully aware of risks and hazards connected with the camp. I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death that may engage in the camps activities, whether caused by the negligence of releasee or otherwise. I further here by agree to indemnify and hold harmless the releasee from any loss, liability, damage or cost, including court costs and attorney's fees, that may accrue related to my child's participation in this camp, whether caused by negligence of releasee or otherwise. **RELEASE AND WAIVER**-I agree to release and hold harmless the Board of Trustees of Wallace State CC, its officers, agents, and employees, while acting in their capacities as such, from any and all claims or liability which may arise in any manner or form from my child's participation in this camp.

Parental Permit

Date _____ Signature of Parent/Guardian _____

ACCC CHAMPIONS

2003, 2005, 2007, 2008, 2009, 2010, 2012, 2013, 2015, 2016, 2017

NJCAA NATIONAL CHAMPIONS

2008, 2013