

**2010 TREVECCA
GIRLS SOFTBALL
MIDDLE / HIGH SCHOOL CAMP**
For more information call
TNU Head Softball Coach Ben Tyree
615-248-1277
e-mail - btyree@trevecca.edu

- Camp #1 June 14-15**
Cost \$100/ 2 days \$65/ 1 day
- Camp #2 July 5-6**
Cost \$100/ 2 days \$65 / 1 day

1/2 tuition is required w/application to secure position.
Final payment is due on registration check-in.

APPLICATION

Campers Name _____

Age _____ Grade Next Fall _____

Will this be your first year in Camp? _____

Parent's Name _____

Street Address _____

City, State, Zip _____

Home Phone _____

Parent's Work Phone _____

Parent's Cell Phone _____

Mail deposit and this form to:

Softball Camp
Trevecca Nazarene University
333 Murfreesboro Road
Nashville, TN 37210

*Trevecca and staff is **not** responsible for lost equipment, radios, cassettes, cell phones, etc.*

INSURANCE INFORMATION

Medical Insurance Company Name

Policy Number _____

In an Emergency, if parents cannot be reached please notify:

Name _____

Relationship _____

Phone Number _____

Family Doctor _____

Phone Numbers _____

Known Allergies/Drug Reactions _____

Asthma _____

Diabetes _____

Last Tetanus Shot or Booster _____

List of Medications Currently Taking _____

I, the undersigned parent or guardian, do hereby authorize the athletic trainer or coaches at camp to secure any and all medical treatment in the event that I cannot be contacted. I further authorize any attending physician to render any and all medical care which he/she may deem necessary.

It is understood that, in any event, an attempt will be made to contact the parent before treatment is started.

I, the undersigned parent or guardian, understand Trevecca Nazarene University does not provide medical insurance for my child and certify that my child is physically fit to attend camp and participate in all camp activities.

Parent or Guardian Signature

Date