

# PITCHING/ALL SKILLS SOFTBALL CAMP



**EIU**  
**SOFTBALL**

Eastern Illinois softball camps are open to any and all and are meant to teach, instruct and challenge student-athletes to take their game to the next level in an organized and supportive teaching and fun environment. Our coaching staff and players work with campers in small groups allowing individuals to showcase their skills while simultaneously increasing their knowledge and ability.

## PITCHING CAMP:

10/28 Rescheduled to **Sunday, Dec. 2 (Grades 5-8)**  
**Sunday, December 2 (Grades 9-12, JC)**

## ALL SKILLS CAMP:

10/28 Rescheduled to **Sunday, Dec. 2 (Grades 5-8)**  
**Sunday, December 2 (Grades 9-12, JC)**

### REGISTER FOR 1 OR 2 SESSIONS:

**PITCHING:** 9 am-11 am - \$60 (Check in: 8:30 am)

**ALL SKILLS:** 11:30 am-3:00 pm - \$75 (Check in: 10:45-11:30 am)

\*Sign up for both sessions - \$120

**DEADLINE TO REGISTER IS SUNDAY, NOVEMBER 25.**

### PLEASE BRING THE FOLLOWING:

- If you sign up for the Pitching Session, you must bring your OWN catcher.
- Make sure to bring a glove, batting gloves, bat, helmet, tennis shoes or turfs (cleats if weather allows), and anything you will need to participate in the clinic.
- It is recommended that you wear your jersey top or a t-shirt with your last name and/or uniform number on the back.

## ONLINE REGISTRATION ONLY

at [www.eiupanthers.com](http://www.eiupanthers.com), under FAN ZONE, SPORT CAMPS

*Sign ups are non-refundable and space is limited so sign up now!  
Each camp will close once filled.*

**For more information, please call the softball office:**

**217-581-2093 or email: [eiusoftball@eiu.edu](mailto:eiusoftball@eiu.edu).**



## HEALTH & CONSENT FORM

This medical treatment and billing authorization form **MUST** be completed and **SIGNED** by the parent to enable the camper to participate.

Camp Attending \_\_\_\_\_ Camp Code: **SBAS**

Camper Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Parent / Guardian \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### HEALTH INFORMATION

Does camper have a history of:

\_\_\_\_ Convulsions \_\_\_\_ Heart Defect/Murmur \_\_\_\_ Asthma \_\_\_\_ Chicken Pox

\_\_\_\_ Diabetes \_\_\_\_ Bleeding Disorder \_\_\_\_ Surgery (past 2 years) \_\_\_\_ Mumps

Brief description of items checked \_\_\_\_\_

Medications: Type, dosage and frequency (list) \_\_\_\_\_

Allergies: (medications, foods, stings, other) \_\_\_\_\_

### INSURANCE INFORMATION

**EASTERN ILLINOIS UNIVERSITY REQUIRES** that all sports campers carry health insurance coverage. The parent/guardian's personal or injury insurance policy will be utilized as the primary insurance for the treatment of injuries and hospitalization for illness or injuries incurred during the sports camps. **If you do not possess health coverage, a temporary policy covering sports camps must be purchased (through your insurance agent) to cover the camper for the duration of the sports camp.** The name of health insurance carrier and policy number must be written below in order to attend an EIU sports camp.

Insurance Carrier Name \_\_\_\_\_

Carrier Address/Phone \_\_\_\_\_

Policy / Group Number \_\_\_\_\_

**AUTHORIZATION FOR TREATMENT:** I do hereby authorize Eastern's athletic training staff to provide first aid, follow-up care and/or referral to Eastern's Health Service Staff, local physician or local hospital for emergency care. Furthermore, I hereby authorize EIU Health Service Staff to provide medical treatment and/or referral for further evaluation and treatment for the above named person in the event this should become necessary while attending camp at Eastern Illinois University.

Signature of Parent / Guardian (required for participation) \_\_\_\_\_ Date \_\_\_\_\_

Athletes must come to the Panther Camps physically sound. No preventative taping will be administered for injuries received prior to camp.

**HEALTH and INSURANCE:** Each applicant must have a Health Consent Form signed by a parent/guardian, stating camper is in good health and who to contact in case of an emergency. Form (above) is also available online at [www.EIUpanters.com](http://www.EIUpanters.com). This form must be completely filled out, signed and returned to us, along with registration.

**Questions? Call Coach Carly Willert at 217.581.2093 or [cawillert@eiu.edu](mailto:cawillert@eiu.edu)**