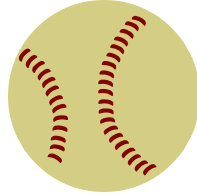


“FALCON SPORTS SOFTBALL” CAMP

at Monmouth Regional High School

Summer 09'



Summer 09'

JUNIORS (9-13) Emphasis will be placed on fundamentals, skill development, small sided games and most importantly on having fun.
COMPETATIVE/HIGH SCHOOL (13-17) Emphasis will be placed on individual skill, team play, and fitness.

Note— If a child whose age is limiting his particular program or skill level, then with prior approval (from Camp Directors) a possible change can be arranged.

MORNING SESSION—June 22nd-25th (9:00am– 12:00pm) Ages 12-17 & Ages 9-11

Cost- \$125.00 all ages

(age groups separated according to skill level)

Coaches will consist of Angela Dello Russo– Assistant Varsity Softball Coach and former MRHS players

For questions contact Angela Dello Russo/adellorusso@monmouthregional.net

732-672-3420

Please return Payment and (signed) information sheet by June 20th
Mr. Spadavecchia -12 Griffen St. Monmouth Beach NJ 07750.

Student _____ Sex ____ Age ____
Address _____ City _____ St. _____ Zip _____
Phone # _____ Cell# _____
Shirt size (youth) S M L (adult) S M L XL (please circle one)

(June23—26) 9:00-12:00 ages 9 -11 & ages 12-17 (the two age groups will be separated according to skill level)

Parent signature _____ Date _____
Emergency contact name _____ phone # _____

ALL CAMPERS MUST HAVE A GLOVE, CLEATS, AND A WATER BOTTLE (a pair of gym shoes are recommended for inclement weather days for possible gym use). If you do not have a bat we will provide you with one.

Refunds/Cancellations—only honored if documented evidence of illness/injury is presented (minus \$30.00 processing fee)

PARENT /GUARDIAN WAIVER

I realize injuries can be a consequence of participation in this activity and no amount of reasonable supervision or use of the facility will prevent injury. I have carefully considered how the possible consequence of injury may impact my child's life, and I chose to accept this risk and allow him/her to participate in the designated activity. In accepting this risk, I expressly and explicitly release, discharge and waive any and all responsibility of Falcon Sports Camp, Monmouth Regional, and the employees of any and all of the fore-going, pursuant to, or pertaining or related to, or arising from, in any manner, injuries to my child as a result of his/her participation in this activity
By my signature below, I certify that I completely understand this document.

Signature of Parent or Guardian _____ Date _____