

**Doane College Softball All-Skills Camp  
Hosted by the Doane Tigers Coaching Staff  
and current Tiger players.**



**Location: Fuhrer Field House  
On the Doane Campus**

**Date: February 13<sup>th</sup> 2010**

**Time: 12:30 AM to 3:30 PM**

**Camp for ages 8 to 18**

**Camp Fee: \$ 50**

***FINE TUNE YOUR GAME BEFORE THE SUMMER SEASON BEGINS!***

**TIGERS ALL SKILLS CAMP**

*Areas to be covered:*

**Base and advanced fundamentals for throwing, hitting, fielding, Pitching, base running.**

**Call for more information: Barry Mosley 402-438-3027**

**or Don Miller 402-489-3878 Visit our website for information [www.doane.edu](http://www.doane.edu)**

**Please make all checks payable to DC Softball and mailed with the registration form to:  
DC Softball, 1501 Patterson Drive, Lincoln, NE 68522**

# DOANE COLLEGE SOFTBALL ALL SKILLS CAMP REGISTRATION FORM

Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ T-Shirt Size (Circle one) S M L XL

\_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Name of School attending \_\_\_\_\_ Grade \_\_\_\_\_

Positions Played \_\_\_\_\_ Coach \_\_\_\_\_

GPA \_\_\_\_\_ ACT \_\_\_\_\_ Class Rank \_\_\_\_\_

## Medical Release

I hereby authorize the members of the staff of Doane College to act for me according to their best judgement in any emergency situation requiring medical attention. Further, I hereby waive and release the camp's personnel and Doane College from any liability for any injuries or illnesses incurred while in softball camp.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_

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