

Medical and Insurance Form

I am the parent or legal guardian of the minor child identified below ("child") and the child is presently under my care and custody. I consent to the child's participation in the camp, conference or visit ("event") identified below and to his or her full participation in all activities that are part of or incident to attendance at the event. I understand my child's participation in the event may involve physical activity, including physical activities that may include risks or inherent dangers that could result in personal injury and/or illness. I, for myself and on behalf of the child, hereby waive and release and agree to hold harmless Transylvania University and its officers, faculty members, employees, staff, volunteers and contractors ("representatives") from any and all liability for injuries or illnesses incurred while participating in the event and activities incident thereto, except where such injury or illness results from the gross negligence of Transylvania University or its representatives.

I authorize Transylvania University, through any of its representatives in their discretion, to act for me to seek medical attention for my child in the event of physical injury or illness and consent to the treatments for my child determined appropriate by any attending person from whom medical attention is sought (including physicians, nurses, emergency medical personnel and/or medical technicians). Transylvania University will attempt to contact me at the phone numbers listed below in the event of a physical injury or illness for which medical attention is sought if time and circumstances reasonably permit such contact. I understand that Transylvania University does not provide health insurance for my child and I agree I am fully responsible for any medical care expenses.

You must submit a copy of the front and back of all health insurance cards covering the participant.

Participant's/Child's Name: _____

Age: _____

Session Attending: _____ Dates: _____

Physical limitations: _____

Physical Impairments: _____

Allergies (including food): _____

Other pertinent information: _____

Health Insurance: Carrier _____

Plan #: _____ Policy# _____

Check if participant has NO health insurance coverage

Parent/Guardian:

Name: _____ Relationship: _____

Phone(s): _____

Name: _____ Relationship: _____

Phone(s): _____

E-mail: _____

I certify that the information provided above is true and correct and agree to the terms and provisions of this Health Insurance Form - Consent and Waiver as set forth above.

Date Signature (Parent/Guardian)



What to bring:

Overnight campers: equipment, running shoes, sunscreen, towel, bathing suit, linens for bed, pillow, personal items. Optional items include snacks, drinks, phone, radio, TV.

Day campers: equipment, sunscreen, running shoes, bathing suit. Optional items include drinks and snacks.



For more information, contact:

Michelle Manning
Camp Director

300 North Broadway, Lexington, KY 40508-1797

(859) 281-2613 or mmanning@transy.edu

Fax: (859) 233-8638

On the Web: transycamps.com

TRANSYLVANIA UNIVERSITY

SUMMER 2010 SOFTBALL CAMPS

Hosted by
Michelle Manning
Head Softball Coach



Youth Skills Day Camp
(ages 7-11)
June 14-16

Advanced Skills Camp
(ages 12-18)
June 14-16

Camp Features

- Intensive hands-on practice of all softball skills including pitching, catching, position work, hitting, bunting, slapping, baserunning, strategy, scrimmages and game management
- Experienced and knowledgeable staff
- Player/coach ratio of 8:1
- Individualized pitching and positional practice
- Camp t-shirt
- Instruction regarding strategy
- Special events, nightly scrimmages for overnight participants
- Multi-level ability groupings

Camp Facilities

- Hall Field
\$2.5 million state-of-the-art field at the corner of Upper and Third Streets
- Clive M. Beck Athletic and Recreation Center (rain site)
\$15 million multi-level facility at the corner of Broadway and Fourth Streets
- Forrer Dining Hall
Transylvania's main dining hall located in Forrer Hall at Broadway and Fourth Streets
- Residence Halls
Participants will be staying in residence halls on campus, close to the cafeteria and the field.

Camp Sessions

YOUTH SKILLS CAMP (AGES 7-11)

9 a.m.-noon / June 14-16

Check-in will be at Hall Field, June 14 at 8:30 a.m. Campers will be **dismissed at noon each day.**

Cost: \$125. Includes instruction and camp t-shirt.

ADVANCED SKILLS CAMP (AGES 12-18)

Day or overnight camp / June 14-16

Check-in will be June 14, 8 a.m. (Overnight campers may check in Sun., June 13, at 8 p.m. for additional \$25 fee.)

Campers will be dismissed at 4 p.m. on June 16.

Cost, overnight campers: \$275. Includes all meals, dorm, instruction, and camp t-shirt.

Cost, day campers: \$225. Includes lunch, instruction, and camp t-shirt.

Discounts

Team discounts are available for groups of 4 or more and for siblings. **To receive the team discount, all applications must be received at the same time.**

Contact the camp director for more information.

Staff



Union College.

Camp Director Michelle Manning is in her fourth season as Transylvania's head softball coach in 2009-10 following previous head coaching stints at Albion (Mich.) College and Shenandoah (Va.) University. Manning was also a graduate assistant at Bethany (W.Va.) College and an all-conference player at Mount

In 2009, Manning guided Transy to the Heartland Conference regular season championship with a 27-12 record, 13-3 in HCAC play. The Pioneers hosted the HCAC tournament and finished second, just missing a spot in the NCAA Division III Championships.



Assistant Camp Director Melanie Pendleton is in her fifth season as member of the Transylvania softball coaching staff. As a certified strength and training specialist (CSCS), she works as the team's strength and conditioning coach.

Pendleton was a four-year starter in the outfield, graduating from Transy in 2005. She received her Master's degree in sports administration from Eastern Kentucky in 2006.

Additional Transy coaching staff as well as current and former players will assist at the camp.

Typical Daily Schedule

8 a.m.	Wake up
8:20 a.m.	Breakfast
9 a.m.-noon	On-the-field session
Noon	Lunch
1-4p.m.	On-the-field session
4:30 p.m.	Dinner*
5-7 p.m.	Situation instruction*

* Denotes overnight campers only

DEADLINE

Application with non-refundable deposit is due June 7, 2010. There will be a maximum of 50 overnight campers. Participants will receive a letter of confirmation. Balance is due at camp check-in.



Softball Camp Application

(Please print. Complete both front and back.)

Name _____

Address _____

City _____ State _____ Zip _____

() _____

Phone _____

Camper's e-mail _____

Parent's e-mail _____

Primary Position _____ Secondary Position _____

School _____

Age _____ Grade Sept. 09 _____ T-shirt size _____

Grad Yr. _____ Summer/travel team _____

Roommate preference (overnight camp) – one name only _____

Please check all that apply:

- Youth Skills Camp: \$125
- Advanced Skills Day Camp: \$225
- Advanced Skills Overnight Camp: \$275
- Overnight camper early check-in fee (July 13): \$25
- Deposit: \$75
- Full Payment: _____

All sessions fill early; return this application as soon as possible. Include a non-refundable deposit of \$75. Make checks payable to Transylvania Softball Camps and send with application and medical form to:

Transylvania Softball Camps
300 North Broadway
Lexington, KY 40508-1797

Approximately two weeks after receipt of your application, you will receive confirmation by e-mail or by U.S. mail with information about drop-off, pick-up, and rain sites.