



GIRLS SOFTBALL CAMP

Day Camp
June 28–July 2, 2010



Athletic Department
One Winooski Park, Box 258
Colchester, Vermont 05439

Non-Profit
Organization
U.S. POSTAGE
PAID
Burlington, VT
05401
Permit No. 154



SAINT MICHAEL'S COLLEGE GIRLS SOFTBALL CAMP HEALTH FORM

In case of emergency contact: _____ Phone: _____

I understand our family will provide insurance coverage if our son/daughter is injured while participating in a Saint Michael's College Sports Camp.
Health Insurance:

Company: _____

Policy #: _____

Family Doctor: _____

I hereby state that my son/daughter is in good health and may participate in the Saint Michael's College All Sports Camp. I also give permission to the attending health professional, in case of emergency, to allow my son/daughter to be treated in the hospital emergency room, if necessary.

Printed name of Parent/Guardian _____

Signature of Parent/Guardian _____

Please list any special health problems or special circumstances:

GENERAL INFORMATION

CAMP DIRECTOR

Robyn Newton, Saint Michael's College Softball Head Coach, 10th year; 1999-2000 Trinity College Head Coach; 1995-1999 four-year Assistant Coach at University of Vermont; 1991-1995 four-year starter for the University of Vermont.

COACHING STAFF

Our staff includes Saint Michael's College Head Coach Robyn Newton and Pitching Coach Ralph Halbach, as well as local college players.

EQUIPMENT

All campers will provide their own shorts, shirts, swimsuit, towel, water bottle and sneakers/cleats. All campers must have two pairs of shoes—one pair to be worn for inside activities, and the other to be worn outside. Outdoor footwear and/or black-soled sneakers will not be permitted on indoor courts. In addition, each camper must provide their own glove. Bat is optional.

FORMS

- Complete the attached registration form. Incomplete forms will be returned.
- Complete the Statement of Health form on reverse side.

MEDICAL/INSURANCE

An athletic trainer is on duty while camp is in session. Coverage by family or other health and accident insurance is required.

HOUSING INFORMATION

Overnight resident campers will be housed in a residential hall, double occupancy. We will attempt to honor roommates requests, and others will be assigned appropriately. Note: no linens will be provided.

MEALS

Lunch will be provided for our full-day campers in our campus dining facility and is included with the camp fee.

FULL-DAY CAMP

- Offered for girls entering grades 5-12.
- Monday through Friday, 9:00 a.m. to 3:30 p.m.
- Opportunity to use swimming pool.

CAMP INFORMATION

OBJECTIVE

To provide the athlete with knowledge and practical experience of fast pitch softball fundamentals. Games will be played each day to reinforce drills, lectures and demonstrations. Campers are assigned to a level based on age, size and experience. Campers will get to play and learn a variety of positions, as well as improve their batting skills, through a variety of drills, games and fun skill stations.

FEES

- Day Camp: \$225.00 per week (5 full days and includes lunch)
- Make checks payable to Saint Michael's College
- Fee includes meals, camp t-shirt and awards

DEPOSIT/CANCELLATION/ REFUNDS

A \$100 deposit per camp is required and should accompany your application. \$25 of the total deposit is non-refundable. The balance is refundable up to one month prior to the start of camp. No refunds will be given to campers who voluntarily leave camp or who are sent home for disciplinary reasons.

Your canceled check confirms your enrollment in the camp that you chose.

Please note: incomplete applications will be returned and processing delayed.

Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.

REGISTRATION

Tarrant Recreation Center at 8:30 a.m., first day of camp.

DATES & TIMES

Monday, June 28 to Friday, July 2, 2010, 9:00 a.m.-3:30 p.m.

FOR FURTHER INFORMATION, PLEASE CONTACT:

Robyn Newton, Camp Director
Athletic Department, Saint Michael's College
One Winooski Park, Box 258, Colchester, Vermont 05439
802.654.2676 • rnewton@smcvt.edu
www.smcvt.edu/athleticcamps



SAINT MICHAEL'S COLLEGE GIRLS SOFTBALL CAMP APPLICATION

Name: _____ Date of Birth: _____
Address: _____ City: _____ State: _____ Zip: _____
Home phone: _____ T-Shirt Size (circle one): _____ Child: L _____ Adult: S M L _____
Grade entering in fall: _____ School: _____ Age (at time of camp): _____
Name of parent/guardian: _____ Parent's day/work phone: _____
E-mail for confirmation: _____ Position: _____

A deposit of \$100 is required for EACH WEEK OF CAMP your child will be attending. The balance of camp fees paid upon registration. Please complete statement of health form on other side. \$25/camp is non-refundable.

Please indicate the session desired for camp:

_____ Day camp (\$225) / June 28-July 2, 2010 (Application due June 1, 2010)

Signature of parent/guardian: _____
Any registration received/postmarked after the deadline date will need to add an additional \$25.00. This will also apply to any walk-ins the day of camp registration.

Please make checks payable to Saint Michael's College and return to:
Saint Michael's College Summer Camps, Athletic Department, One Winooski Park, Box 258, Colchester, VT 05439

Office Only: Date Rec'd: _____ Amount Pd: _____ Check #: _____ Amount Due: _____ Initials: _____