

John Conway Softball Two-Day Camps

Come join Saint Leo head softball Coach John Conway, and the Saint Leo softball team, in an intense and competitive instruction sessions to help improve player's skill and knowledge in the game of softball. Boasting over 20 years of coaching experience in St. Louis, Coach Conway helmed NCAA Division III Fontbonne University for four years. His time there produced three NCAA Tournament appearances before being hired on as Saint Louis University's (Division I) head coach during the summer of 2006.

Coach Conway completed four successful years at Saint Louis where he broke multiple school records including, four straight Atlantic-10 Conference appearances and most wins in a season. Coach Conway starts his first year at Saint Leo University where his goals are to re-build a strong and competitive softball program.



Campers can choose from one of two camps. The Basic Skills Camp is designed for pre-high school players, while the Elite Skills Camp is designed for high school level athletes.

Registration

(check one)

- Pre High School Camp (\$100)
- High School Camp (\$150)

TEAM DISCOUNT!!

\$10 for each player if five or more players from the same team register for either camp.

Name of Camper:

Address:

City: State: Zip Code:

Phone Number:

Date of Birth: / / Grade:

E-mail:

For registration, please mail the completed form above, along with the attached Waiver of Liability form, and your payment to:

Saint Leo University Softball Camps
5023 Silver Charm Terr
Wesley Chapel, FL 33544

Please make checks payable to John Conway

For further questions, please contact John Conway at (352) 588-8451 or by E-mail at john.conway02@saintleo.edu

Pre High School Camp • \$100

June 27-28, 2011

Camp location at Saint Leo University softball field

- Designed for players who compete at the pre high school level

- Camp takes place from 9 a.m. – 3 p.m.

High School Camp • \$150

June 29-30, 2011

Camp location at Saint Leo University softball field

- Designed for players competing at the high school level

- Camp takes place from 9 a.m. – 3 p.m.





Waiver, Release, and Hold Harmless Agreement

I, the undersigned, hereby acknowledge my receipt of the permission and privilege to participate in _____ as a member or guest of the duly recognized SAINT LEO UNIVERSITY, INC. In consideration of the permission and privilege allowed me hereunder, I do hereby specifically agree that I will indemnify, save and hold harmless SAINT LEO UNIVERSITY, its officer, agents, employees, and all persons whether participants or spectators at or elsewhere from any or all losses, claims, actions or proceedings of any and every kind and character which may be presented or initiated to recover money, property, or damages for any injuries to person, or injurious results, or any damages to property suffered during the conduct of the above event described, and arising directly or indirectly from any activity by me as a member of participant.

In accepting the permission and privilege to participate under this waiver, release, and hold harmless agreement, I understand that this waiver, release and hold harmless agreement, extends to and applies to any personal injuries, injurious results, damages or losses which I, myself, may experience or sustain while participating in the above named event. I covenant for myself, my estate, executors, heirs, and assigns, not to file suit or initiate any claim procedures in respect to any personal injuries, property damages, or losses I may experience or sustain arising directly or indirectly out of my activities hereunder. I freely assume all risks, hazards, and losses which may befall me in connection with my exercise of the permission and privilege allowed me hereunder.

To ensure prompt attention in case of sickness or accident, I hereby authorize the person or persons in charge to incur expense considered necessary for treatment, and I agree to pay for same if this is in excess of the amount paid by any personal accident or health insurance policy that may be in effect at the time of sickness or accident.

This waiver, release, and hold harmless agreement shall apply to any and all activities associated with the above named event by the undersigned on the area in use by SAINT LEO UNIVERSITY, INC.

I, the undersigned also relieve of all responsibility of my participation in the above described event, the Board of Trustees, and Saint Leo University, their officers, agents, employees and all persons connected. I have read this release and understand all of the terms. I execute it voluntarily and with full acknowledge of its significance.

State of _____ County of _____

Month Day Year

Participant's Signature
Please print name here: _____

(Parent approval is required if participant is under the age 18)
Notary is required for parent's signature if not witnessed by a University Representative

Signature of University Representative as Witness

The foregoing instrument was acknowledged before me this _____ day of _____, 20____.

By _____, who is personally known to me or who has produced _____ as identification and who did (did not) take an oath.

(Notary seal)
Signature of Notary

Please list name of person to notify in an emergency.
Name: _____
Phone: _____
Relationship: _____

Please note any medical condition/allergies you may have that we should be aware of in case of an emergency:

