



Camper: \_\_\_\_\_ Age: \_\_\_\_\_

School Attended Last Year: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

\*Please check appropriate T-shirt size:

- |                                   |                                  |                                  |
|-----------------------------------|----------------------------------|----------------------------------|
| <input type="checkbox"/>          | <input type="checkbox"/>         | <input type="checkbox"/>         |
| <input type="checkbox"/> Youth XS | <input type="checkbox"/> Youth M | <input type="checkbox"/> Adult M |
| <input type="checkbox"/> Youth S  | <input type="checkbox"/> Youth L | <input type="checkbox"/> Adult L |

**CAMP COST: \$110 Pre-register or \$125 Day Of  
MUST PRE-REGISTER BY JULY 10th**

**CHECKS TO:** Northview High School Softball

**MAIL APPLICATION & CHECK TO:**

Nothview Fastpitch  
% Mike Van Frayen  
165 West Court  
Johns Creek, GA 30097

**PARENT RELEASE:**

I will not hold Fulton County Board of Education, Northview High School, Northview Softball FUNdamentals Camp, Northview Coaches, staff or camp staff responsible for any injury to my child. This is to certify that I have insurance to cover any injury that might occur during participation of the camp.

The law requires that parental permission be obtained for emergency operative procedures on minors. The following consent form should be signed by the parent so that no unnecessary delays will occur with operative procedures. However, no operation will be performed, except emergency, without parents being contacted and fully informed. I give permission to administer over the counter medication as well as such diagnostic, therapeutic, and operative procedures as may be deemed necessary.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

X \_\_\_\_\_  
Parent / Legal Guardian Signature

Northview Fastpitch  
% Mike Van Frayen  
165 West Court  
Johns Creek, GA 30097



The Second Annual  
Northview Fastpitch  
FUNdamentals Camp  
For Girls Entering Grades 3-8



July 28-30 (Tues-Thur)



# FUNdamentals Camp

**Northview High School**

**July 28- 30**

(Tuesday through Thursday)

**For girls entering grades 3-8.**



## Each Camper Will Be Taught:

- Defensive Fundamentals for both Infield and Outfield positions
- Throwing Fundamentals / Practice Tips
- Hitting/Bunting/Slapping/Skill Work
- Team Play - Group Contests
- Agility Footwork
- Pitching/Catching (for those that already have basic fundamentals)

## All Campers Receive

- An official camp T-shirt
- Snacks
- Cookout the last day of camp

## Camp Staff

Camp will be staffed by Coach Como, Coach Payne. Coach Payne brings 15 years of softball experience at the D1 collegiate and high school level to the camp.

Campers will also meet and work with members of the Northview Varsity Softball team.

## Registration

**Pre-Registration Cost: \$110**

\*No Refunds-Walk-ins (Wednesday Only) add \$25

**Please Make Checks Payable to  
Northview Softball**

**Registration Forms Due By  
Friday July 10th**

## Important Times:

**Tuesday, July 28**

**Check in: 8:30am**

**Instruction: 9:00am-12:00pm**

**Wednesday and Thursday**

**Field Opens 8:45 am**

**Instruction: 9:00am-12:00pm**

**Player Cookout is Thursday 12:30-1:30**



### **INSURANCE INFORMATION:**

Please attach a copy of the appropriate insurance card or fully complete the insurance section below.

Name on Insurance Card: \_\_\_\_\_

Name of Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

### **MEDICAL INFORMATION:**

*PLEASE LIST ALL THAT APPLY*

Medication camper is currently taking:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Medical conditions currently under treatment:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Physical limitations that may hinder participation in camp:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Known allergies to any medications:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Over to Complete**

