



David Russo Softball Camp

For Ages 6-13

June 13-16, 2016

9:00 a.m. - 12:00 noon

Cost-\$90

The camp includes hitting drills, defensive drills, base running skills, and pitching drills, as well as live game action.

The camp will be conducted by Wallace Community College Head Coach David Russo and WCC Assistant Coach Clair Goodson.

Participants may be dropped off at the WCC softball field between 8:30 and 9:00 a.m. The staff will be on-site for these arrivals.

Campers should report wearing shorts and tennis shoes. They should bring gloves, their own bats, catching equipment (if applicable) and \$3.00 each day for snacks if desired. All campers will receive a camp t-shirt.

Use the registration form below to register for the camp or register on-site at the softball field.

For additional information, contact Coach Russo at (334) 556-2216 or Coach Goodson at (334) 748-0361 or go to <http://www.wallace.edu/athletics/softball>

REGISTRATION FORM FOR DAVID RUSSO SOFTBALL CAMP

Last Name	First Name	Initial
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Parents Name	Home Phone	Work Phone
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Mailing Address _____

	City	State	Zip
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Family Doctor _____ Phone _____

Person to call in case of emergency _____ Phone _____

Birthday _____ Age _____ Sex _____ T-Shirt Size _____

**Mail Registration to: David Russo
Wallace Community College
1141 Wallace Drive
Dothan, Al 36303**

***Please make checks payable to David Russo**

MEDIA CONSENT

I, the undersigned, do hereby consent to the use by Wallace Community College of the image, voice, or both of the minor child under the age of 18 described below, in (1) the video, photograph, or audio recording described below; and (2) any video, photograph, or audio recording reproduced either in whole or in part from the video, photograph or audio recording described below. I also understand that images may be used in social media.

I warrant that I am the parent or legal guardian of the minor described below and have the full right and authority to grant this consent on behalf of such minor.

In addition, I waive all claims to compensation or damages based on the use of such minor's image or voice, or both, by the College. I also waive any right to inspect or approve the finished photograph or video or audio recording.

I understand that this consent is perpetual, that I may not revoke it, and that it is binding on the minor, our heirs and assigns.

Printed name of minor / Age

Witness signature

Signature of parent or legal guardian

Witness printed name

Printed name of parent or legal guardian

Date