



Mail Registration Form To:

**Lauren D. Carrigee
139 Teurlings Drive
Lafayette, LA 70501**

LAUREN D. CARRIGEE'S

EASTER SOFTBALL CAMP



**April 2-4, 2018
9:00 AM - NOON
Cost: \$100
2nd - 8th Grade
TCH Lady Rebel Field**

Camp Instructors

Host: Lauren D. Carrigee
Head Softball Coach
Teurlings Catholic High School
2013 State Runners-Up

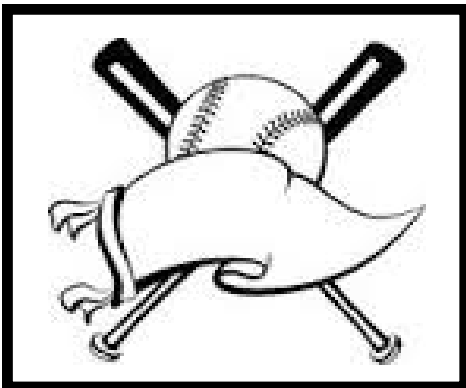
*Former Notre Dame High Coach
2010 State Champions*

Former LSU SS/3rd Baseman - Softball

*Member of the 2004 Women's
College World Series Team*

*Former player for Teurlings Catholic
2 State Championships (2000, 2001)
Runners-Up (2002)*

Instructors: 2018 Lady Rebel
Softball Team



Early Registration - mail form and
payment to Lauren D. Carrigee

Late Registration - sign up on
Monday, April 2 - 8:15-8:45 AM

Team and Family Discounts Available!

Providing fundamental
teaching for:
Throwing
Fielding
Hitting

Campers will receive
instruction for drills to
improve upon skills for
years to come.

Campers will need to bring their
own gloves, bats and cleats

Concessions will be sold

QUESTIONS:

Email Lauren D. Carrigee
lcarrigee@tchs.net

Registration Form

Last Name: _____

First Name: _____

Age: _____

Grade: _____

School: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

E-mail _____

Emergency Contact: _____

Emergency Phone # _____

T-shirt size (Youth/Adult) - circle one

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AS AM AL AXL

I, the parent/guardian of the registrant, a minor, agree that I and the registrant will abide by the rules and regulations of the Rebel Sports Camps and its instructors. Recognizing the possibility of physical injury associated with sports and in consideration for the Rebel Sports Camps accepting the registrant for its summer programs and activities, I hereby release, discharge and/or otherwise indemnify the Rebel Sports Camps, its affiliated organizations and sponsors, their employees and associated personnel, including the owners of field and facilities utilized for the program against any claim by or on behalf of the registrant's participation in the Camp and/or being transported to or from the same, which transportation I hereby authorize. I also grant permission for Rebel Sports Camps officials to authorize medical treatment for registrant in the event of any emergency in which I cannot be contacted.

X _____
Parent/Guardian Signature Date