

2025 Lancaster Summer Softball Camp

DATES: June 16-18

PURPOSE: Our Lancaster Softball Camp will give your daughter a chance to work with the Lancaster High School coaching staff and players from the team. This camp will feature fundamentals, competitions, and drills.

GRADES/TIMES: Youth Camp (9:00-11:30 am each day for students entering grades 2-8)

LOCATION: Lancaster High School Softball Field (beside new turf baseball field)

COST: \$ 75 (includes instruction, a Camp T-Shirt)

PAYMENT: *Make checks payable to: Lancaster Softball*

STAFF: Lancaster High School Coaching Staff and Players/Former Players

REGISTRATION: Please complete the bottom and return to Lancaster High School with check by May 26th (Attention: Allison Kinniard Varsity Softball Coach, 1312 Granville Pike Lancaster, OH 43130). Payment must be attached or you may not receive a t- shirt.

QUESTIONS: Contact Allison Kinniard Cell: 614-774-2030 or Email: a_kinniard@lcsschools.net

Student Name: _____ Age: _____

School they attend: _____

Home Address: _____

City: _____ Zip: _____

Phone Number: _____

Grade Entering: _____

Youth Shirt Size (please circle): S M L XL

Adult Shirt Size (please circle): XS S M L XL XXL

I _____, give my permission for my child, _____, to participate in the Lancaster Softball Camp and agree that any medical services needed are to be covered by our family medical coverage. In consideration for my child's participation, I will not hold the camp employees or Lancaster City Schools responsible for any loss, damages, or injuries that may be received as a result in the participation in this camp. In addition, I give my permission for any medical treatment by any qualified physician or at the nearest hospital emergency room in case that I cannot be reached.

Parent/Guardian Signature: _____

Emergency Contact: _____