

Best Ever Camp Program

Mission Statement

Softball Alberta's mission is to promote, coordinate, and foster the development of softball in the Province of Alberta. Our aim is to establish a structure that allows us to accomplish our mission, and to create programs that aid in the growth of the sport.



Goal

To select the “Best Ever” softball teams to represent Alberta at Alberta Summer Games, Western Canada Summer Games and eventually the Canada Games. The ultimate goal is the win a Gold medal for Alberta.

How is the goal attained?

By holding development camps such as these, help train and develop our athletes across the province.

Who is eligible to attend?

This program is designed to target the squirt age, those born in 2000 and 2001.

What skills will be taught?

Fundamental skills such as throwing, catching, base running, and hitting. And there will also be specific sessions on infielding and outfielding.

What does it cost to attend?

The registration fee is:

\$50.00 for registered members

\$60.00 for non-registered members



Best Ever Camp Registration Form

Registration Deadline is **one week prior** to the camp's start date!

I would like to attend the following camp(s):

- Medicine Hat April 28
- Sedgewick April 29
- Brooks May 5
- Westlock May 6
- Sherwood Park May 12
- Sundre May 12
- Big Valley May 12
- Coronation May 13

NOTE: You may attend more than one camp but the full fee is payable for EACH camp you attend.

Check Softball Alberta's website for other possible camp date and locations.

Fee Enclosed: _____

Payable by: ___ Cheque
 ___ Money Order
 ___ Master Card
 ___ Visa

Payable to:
 Softball Alberta
 9860-33 Avenue
 Edmonton, AB T6N 1C6

Name on Card: _____

Card Number: _____

Expiry Date: _____

Please send completed form to:

Jackie Desilets
 jackie@softballalberta.ca
 780-461-7757 (fax)

Participant Information:

Name:				
Address:				
City:				
Postal Code:				
Phone No.:				
Birthdate:	Month:	Day:	Year:	
Gender: <i>check one</i>	Male:	Female:		
T-Shirt Size: (Adult Sizes)	X-Small:	Small:	Medium:	Large:
Last year I played for:				

Parent / Guardian Information:

Name:		
Relationship to the Participant:		
Contact No.:	Work:	Cell:
Email: (All future correspondence will be sent via email)		

I, _____, being the parent/guardian of,
 _____ give my permission for **him/her** to
 participate in Softball Alberta's "Best Ever Program".

 Parent/Guardian Signature

 Date