

# SOFTBALL



## CAMPS ARE OPEN TO ANY AND ALL ENTRANTS

(limited only by number, age, grade level and/or gender)

Eastern Illinois softball camps are open to any and all and each camper will be taught skills on hitting, defense, and base running, and then will be given the opportunity showcase their skills in live scrimmages.

## EIU PANTHER SKILLS CAMP

June 16, 2025 • 9 AM-1 PM • Softball Field

Grades 3-7 • \$100

CHECK-IN IS AT 8:30 AM • CAMP CODE 754

## ELITE PANTHER PROSPECT CAMP

June 17, 2025 • 9 AM-4:30 PM • Softball Field

Grades 8-12 • \$175

CHECK-IN IS AT 8:30 AM • CAMP CODE 782

LUNCH IS 12-1 PM - NOT INCLUDED

FOR INCLEMENT WEATHER - LANTZ FIELDHOUSE

## REGISTER ONLINE

at [www.eiupanthers.com](http://www.eiupanthers.com), under **FAN ZONE, SPORT CAMPS**  
or **COMPLETE AND MAIL THIS FORM, OR DAY OF CAMP.**

*Sign ups are non-refundable and space is limited so sign up today!*  
*Each camp will close once filled.*

## 2025 Softball Camp Registration Form

As a parent (or guardian), I hereby give my permission for my child to participate in the Panther Camp and acknowledge the fact that he/she is physically able to participate in clinic activities. I further acknowledge I will be responsible for any sickness, and I understand that Eastern's clinic insurance may not totally pay all medical expenses of an accidental injury incurred during the camp, depending upon family coverage.

PARTICIPANT'S NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY / STATE / ZIP: \_\_\_\_\_

HOME PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

SCHOOL ATTENDING: \_\_\_\_\_ GRADE IN FALL, 2025: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_

EMAIL: \_\_\_\_\_

**MAIL TO: 2025 EIU SOFTBALL CAMPS**  
**600 LINCOLN AVE., GRONIGER ARENA, CHARLESTON, IL 61920**

## HEALTH & CONSENT FORM

This medical treatment and billing authorization form **MUST** be completed and **SIGNED** by the parent to enable the camper to participate.

Camp Attending \_\_\_\_\_ Camp Code: \_\_\_\_\_

Camper Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION

Parent / Guardian \_\_\_\_\_ Relationship \_\_\_\_\_

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

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

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

### HEALTH INFORMATION

Does camper have a history of:

\_\_\_\_\_ Convulsions \_\_\_\_\_ Heart Defect/Murmur \_\_\_\_\_ Asthma \_\_\_\_\_ Chicken Pox

\_\_\_\_\_ Diabetes \_\_\_\_\_ Bleeding Disorder \_\_\_\_\_ Surgery (past 2 years) \_\_\_\_\_ Mumps

Brief description of items checked \_\_\_\_\_

Medications: Type, dosage and frequency (list) \_\_\_\_\_

Allergies: (medications, foods, stings, other) \_\_\_\_\_

### INSURANCE INFORMATION

**EASTERN ILLINOIS UNIVERSITY REQUIRES** that all sports campers carry health insurance coverage. The parent/guardian's personal or injury insurance policy will be utilized as the primary insurance for the treatment of injuries and hospitalization for illness or injuries incurred during the sports camps. **If you do not possess health coverage, a temporary policy covering sports camps must be purchased (through your insurance agent) to cover the camper for the duration of the sports camp.** The name of health insurance carrier and policy number must be written below in order to attend an EIU sports camp.

Insurance Carrier Name \_\_\_\_\_

Carrier Address/Phone \_\_\_\_\_

Policy / Group Number \_\_\_\_\_

**AUTHORIZATION FOR TREATMENT:** I do hereby authorize Eastern's athletic training staff to provide first aid, follow-up care and/or referral to Eastern's Health Service Staff, local physician or local hospital for emergency care. Furthermore, I hereby authorize EIU Health Service Staff to provide medical treatment and/or referral for further evaluation and treatment for the above named person in the event this should become necessary while attending camp at Eastern Illinois University.

Signature of Parent / Guardian (required for participation) \_\_\_\_\_ Date \_\_\_\_\_

Athletes must come to the Panther Camps physically sound. No preventative taping will be administered for injuries received prior to camp.

**HEALTH and INSURANCE:** Each applicant must have a Health Consent Form signed by a parent/guardian, stating camper is in good health and who to contact in case of an emergency. Form (above) is also available online at [www.EIUpanters.com](http://www.EIUpanters.com). This form must be completely filled out, signed and returned to us, along with registration.

**Questions? Email Coach Paulson at [klpaulson@eiu.edu](mailto:klpaulson@eiu.edu).**