



Eastern Illinois University

BASEBALL FALL SHOWCASE

SATURDAY

OCTOBER 15 • 8 am
COACHES STADIUM

The EIU baseball program is offering a showcase camp for high school participants only. Morning session will provide instruction from the EIU coaching staff, followed by an afternoon game.

REGISTRATION: 8 am, Coaches Stadium
TIME: 8:00 am - 4:30 pm
COST: \$100.00 (payable to Eastern Illinois University)
CALL: Coach Skylar Meade
(217) 581-7283 office, (217) 962-0838 cell
EMAIL: stmeade@eiu.edu

SCHEDULE:

9:00 am: Hitting and Player Skill Evaluation
11:00 am: Offensive and Defensive Skills Instruction
Noon-6:00 pm: Games & NCAA Recruiting Guidelines

BASEBALL SHOWCASE 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 2011 _____
PARENT/GUARDIAN NAME: _____

PARENT/GUARDIAN SIGNATURE
EMAIL: _____

PLEASE RETURN THIS REGISTRATION FORM TO:
EIU Baseball Fall Showcase
EIU BASEBALL
600 Lincoln Avenue, Charleston, IL 61920
or ONLINE @ www.eiupanthers.com

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 **BBFSC**
Social Security Number _____
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.EIupanthers.com.** This form must be completely filled out, **signed** and returned to us, along with registration.

