

(Cont....)

We understand that coaches, trainers, and team physicians may use their own judgment in securing medical aid and ambulance service in case of an emergency or in mild injuries where parents cannot be reached. Also the team physician, trainer, or coach may apply first aid treatment till the family physician can be contacted.

I have read and forgoing, acknowledge the WARNING above, accept the risk described and agree to abide by the principles and regulations contained therein.

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Parent signature

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Student Signature

**INTERSCHOLASTIC ACTIVITIES  
INSURANCE WAVER**

I fully understand the DCSD Re 1 does not provide health or life insurance coverage for the above named student while he/she is participating in the activities associated with interscholastic sports. I/We further understand that it is my/our responsibility to provide adequate insurance coverage to the above named student.

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Parent Signature

**WARNING:** Although participating in supervised interscholastic athletics and activities may be one of the least hazardous in which any student will engage in or out of school, BY ITS NATURE, PARTICIPATION IN INTERSCHOLASTIC ACTIVITIES INCLUDES A RISK OF INJURY WHICH MAY RANGE IN SEVERITY FROM MINOR TO LONG TERM CATASTROPHIC. Although school injuries are not common in supervised school athletic programs, it is impossible to eliminate the risk. Participants can and have the responsibility to help reduce the chance of injury. PLAYERS UNDERSTAND AND BY THEIR PARTICIPATION, AGREE THAT THEY MUST AND WILL OBEY ALL SAFETY AND TRAINING RULES, FOLLOW DIRECTIVES OF THE COACH, PROMPTLY REPORT ANY PHYSICAL PROBLEMS TO THEIR COACHES, FOLLOW A PROPER CONDITIONING PROGRAM AND INSPECT THEIR OWN EQUIPMENT DAILY. By signing this permission form parents and students acknowledge that they have read and understand this warning. PARENTS OR STUDENTS THAT DO NOT WISH TO ACCEPT THE RISK DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS PERMISSION FORM.

...(Continued on registration)

ThunderRidge High School  
1991 W. Wildcat Reserve Parkway  
Highlands Ranch, CO 80129



**ThunderRidge  
High School**



**13th Annual**

**SOFTBALL YOUTH  
CAMP**

**5/30 - 5/31, 2023**

**10am-2pm**

## TRHS SOFTBALL 2023 YOUTH CLINIC

### Mark your Calendars...

Tuesday May 30th

Thru

Wednesday May 31st

10am-2:00pm

### Ages

-6-15 up to 8<sup>th</sup> grade for the 2023-24 school year. (not for incoming freshman to TRHS)

-All players of all levels welcome to attend!

-Boys are welcome as well, as we teach many of the same mechanics and drills for the game of baseball.

**COST: \$150.00 due by 5/29/23**  
**Late registration and walkups welcome**

**\$160.00**

\*\*\*Checks payable to **GBBC**\*\*\*

### What's Included:

T-Shirt, Prizes, Fun and  
Lunch on Last Day of camp!!!

### THINGS TO BRING:

Glove, Bat, Hat, Water, and Softball attire.  
Gym t-shirt and softball pants.

## Coaches

### **Coach Kevin McAllister**

Coach McAllister is his 8<sup>th</sup> year as the Varsity Head Coach of the Grizzlies. In 2017 Coach McAllister & the Grizzlies finished with a record 17-6 (an all-time TRHS record), were co league champs and played their way States (top 16 teams). In 2022 the Grizzlies again reached the Sweet 16. He has one 2<sup>nd</sup> place National Championship (2019) and graduated many former players to play college softball. Has 20+ years of experience coaching the youth in our community.

### **Coach Carl Ballard**

Coach Ballard is in his 7<sup>th</sup> year as the Varsity Assistant Coach. Coach Ballard has been coaching club softball for over a decade. He has one 2<sup>nd</sup> place National Championship and graduated many former players to play college softball.

### **Coach Kim Alanis**

Coach Alanis in her 2<sup>nd</sup> year as the head coach of the Mountain Vista Golden Eagles competing in the Continental league. Coach Alanis will be working with all positions.

## **TRHS Players**

The players from the program will once again be involved with teaching the drills and mechanics of the TRHS program.

## **REGISTRATION**

\*\*\*Please complete the registration as well as sign the waiver on the back and include with payment \*\*\*  
(Please Print)

Participants Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

School attending 2023-24: \_\_\_\_\_

Grade: \_\_\_\_ Age: \_\_\_\_



T-Shirt Size (circle one)

YS YM YL Adult S Adult M Adult L

**Mail to:** ThunderRidge High School  
1991 W. Wildcat Reserve Parkway  
Highlands Ranch, CO 80129  
ATTN: Kevin McAllister  
Questions: kbigmac19@yahoo.com