



Texas Private School Coaches Association
13901 Midway Rd. Suite 102-430
Farmers Branch, TX 75244-4388

Dear All Star,

Congratulations on being selected to play in the second annual TPSCA All Star softball game! This game will be played on Friday, June 18 at 5:30 p.m. at Oran Good Park Farmers Branch, TX (Dallas Metroplex). Our organization has worked diligently to provide an atmosphere to showcase the excellent quality of softball played across the region by our private schools. The players that comprise the North and South squads come from all classifications of private schools in the TAPPS, SPC, and independent schools in Texas and Oklahoma. It is our desire to make this a memorable experience for you as you fellowship with this great group of talented young women.

We want to make this memory a lasting one for you and the Texas Private School Coaches Association, therefore, we would ask that each of you remember that you are representing your families, your schools, and your communities with your attendance. Proper dress will be expected at all events.

Please read and sign the attached forms. They include the All-Star Information and the Release of Liability. Additionally, each athlete will be required to purchase a supplemental insurance policy for \$30.

By signing this form, you and your parents agree to abide by the standards of conduct and dress as explained in this letter. Please return these forms and the insurance fee when you report for practice at the specified location (see attached sheets).

We look forward to seeing you this summer!

Sincerely,

Randy Hollas
Athletic Director, The Woodlands Christian Academy
President, TPSCA

2010 All-Star Information



Check In Date: Friday, June 18, 2010

Check-In Site: Oran Good Park
13401 Tom Field Rd.
Farmers Branch, TX 75234

Check-In Time: 9:15 – 10:00 A.M.

Check-In Procedures: Please bring all insurance money and signed waiver to practice site.

Game Date/Location: June 18, 2010 @ Oran Good Park at 5:30 p.m.

Each player **will be provided** the following:

- All Star Luncheon meal. (12:00 p.m. on Friday @ University of Dallas)
- Game jersey and game pants to be returned after the game.

Check-list of Items YOU MUST PROVIDE (Your high school may provide many of these items):

Items for Softball Game/Practice

_____ Practice Pants	_____ HS Visor (if applicable)
_____ Cleats	_____ Practice T-Shirt (from H.S.)
_____ School colored game socks	_____ 1 Bat
_____ 1 Batters Helmet (from High School)	_____ Catchers Gear (for catchers)

Other

_____ Signed Release of Liability
_____ \$30 Insurance Fee (check made to TPSCA)

****Note****

- 1) All clothing must be non-offensive and reflect those qualities we expect in student-athletes in private schools.
- 2) All alcohol, tobacco, and drug use is prohibited and will result in expulsion from the event.
- 3) Travel from practice site to University of Dallas must be provided by the Athlete/family as well as travel from University of Dallas to game site.

Athlete Signature _____

Parent Signature _____

2010 TPSCA ALL-STAR GAME RELEASE FORM

NAME OF PARTICIPANT: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (Home) _____ (Work) _____ (Cell) _____

MEDICAL INSURANCE PROVIDER: _____ POLICY NUMBER: _____

We, the undersigned, hereby certify that we are the parents or legal guardians of the above named participant (the "Participant"). We hereby give permission for the staff of the TPSCA All-Star events and its coaches to seek appropriate medical attention for the Participant and for the appropriate medical attention to be given and for the Participant to receive appropriate medical attention in the event of any accident, injury or illness incurred while practicing for or playing in the 2010 TPSCA All-Star game (the "Game") scheduled on June 18 or 19, 2010.

We hereby certify by our signatures below that the Participant is currently covered by a health insurance policy and will be covered for the entire period beginning on June 16, 2010 and ending June 19, 2010. We agree to be fully responsible for any and all costs of medical attention and treatment that arise from any accident, injury or illness sustained by Participant during practice for or play in the Game.

We hereby acknowledge that during practice for and at the Game, the Participant will participate in activities that will involve, among other things, physical contact of the body with other persons or objects, including the ground, and that the Participant may incur serious injury. In consideration of the Participant's invitation to play in the Game (and to participate in related activities) we, the undersigned, acting on behalf of the Participant and his heirs, executors and administrators, hereby agree as follows

(A) WE HEREBY WAIVE, RELEASE, HOLD HARMLESS AND FOREVER DISCHARGE THE TEXAS PRIVATE SCHOOL COACHES ASSOCIATION, A TEXAS NON-PROFIT ORGANIZATION, ITS DIRECTORS, OFFICERS, COACHES, TRAINERS, MANAGERS, OFFICIALS, AGENTS, EMPLOYEES, REPRESENTATIVES, SUCCESSORS AND ASSIGNS (THE "RELEASED PARTIES") OF AND FROM ANY AND ALL CLAIMS FOR DAMAGES THAT MAY ARISE FROM THE PARTICIPANT'S PARTICIPATION IN PRACTICES FOR AND PARTICIPATION IN THE GAME (INCLUDING TRAVEL TO AND FROM PRACTICES AND THE GAME ITSELF); AND

(B) WE HEREBY WAIVE, RELEASE, HOLD HARMLESS AND FOREVER DISCHARGE THE RELEASED PARTIES OF AND FROM ANY AND ALL CLAIMS FOR DAMAGES, INJURY OR LOSS TO PERSON OR PROPERTY WHICH MAY BE SUSTAINED DURING PARTICIPATION IN EVENTS RELATED TO, OR PRACTICES IN PREPARATION FOR, OR TRAVEL DURING ANY ACTIVITIES, OR PLAY IN THE GAME, WHETHER OR NOT DAMAGES, INJURY OR LOSS IS DUE IN WHOLE OR IN PART TO THE NEGLIGENCE OF ANY OF THE RELEASED PARTIES.

We hereby further agree that any photographs or videos of the participant may be used by the Texas Private School Coaches Association in any future promotional, advertising or instructional materials.

AGREED AND ACCEPTED AS OF THE DATE WRITTEN BELOW:

MOTHER/GUARDIAN PRINTED NAME: _____

MOTHER/GUARDIAN SIGNATURE: _____ DATE: _____

FATHER/GUARDIAN PRINTED NAME: _____

FATHER/GUARDIAN SIGNATURE: _____ DATE: _____

PLAYER PRINTED NAME: _____

PLAYER SIGNATURE: _____ DATE: _____



2010 TPSCA All Star Softball Itinerary

Friday, June 18, 2010

9:15 – 10:00 A.M.	Check-In to Practice Site – Oran Good Park
10:00 A.M.	Practice Session
12:00 P.M.	All Star Luncheon at University of Dallas
1:00 P.M.	Individual Team Meetings at University of Dallas
1:30 – 3:15 P.M.	On your own
3:30 – 4:45	Pictures and Pre-game Warm-up (Oran Good Park)
5:30 P.M.	Softball Game (Oran Good Park)
7:30 P.M.	Baseball All-Star Game (R.L. Turner High School)