



W A L L A C E  
S T A T E  
S O F T B A L L

**Commitment:** the enthusiastic devotion to individual preparation and team practices

**Relentless execution:** all-out effort from start to finish, regardless of score, significance or insignificance of the event.

**Self-discipline:** the control of emotions, thoughts and focus.

**Good Sportsmanship:** respect for the opponents as our teams tries to beat their brains out in competition. Showing up an opponent is unacceptable behavior.

**Playing the game right:** the application of knowledge and respect of and for the nature of competition.

**Responsibility:** to softball, academics, to God, family, school, community and self.

**Courage:** aggressive, competitive behavior – always, particularly in the face of adversity.

**Individual sacrifice:** for the sake of collective goals.

**Concern:** for what the uniform represents, as stated above. For the well being of teammates.



2008  
NJCAA National Champions 5-0  
NJCAA #1 Academic Softball Team.  
ACCC State Champions 4-0  
Region 22 Champions  
ACCC North Division Champions 20-0  
Record—68-8  
41 straight wins to finish the season  
Team Batting Average—.333  
5 NFCA All Americans

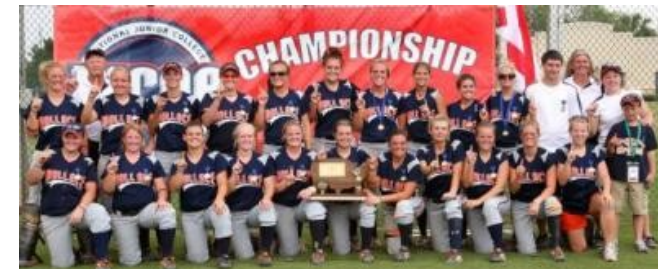
2007  
NJCAA—7th in the Nation  
ACCC State Champions  
Region 22 Champions  
ACCC North Division Champions  
Record—64-11 Most wins be any college team at any level  
Team Batting Average—.365

2006  
ACCC State Runner-up  
ACCC North Division Champions

Wallace State Softball  
Attn: Coach Jayne Clem  
801 Main St. PO Box 2000  
Hanceville AL 35077

Phone: (256) 352-8355  
office: (256) 233-4628  
Email: wscsoftball@yahoo.com

## LADY LIONS SOFTBALL CAMP



### 2008 National Junior College Champions

Come work with the best, so  
you can always play your  
best!

25-26 May 2009

Wallace State Campus  
Bobby McCracken Stadium

9-12 and 1-4



## Camp Session and Fees

25-26 May 2009

9 AM—4 PM

Lunch break 12-1 PM

Bring a Sack Lunch

Camp Session: \$90

Part Session: \$60



## FEATURES

Personal attention with Coach Clem and National Championship Players

Excellent instruction  
Constant interaction with Wallace coaches and players  
Individual and group instruction

## EQUIPMENT CHECKLIST

- Socks
- Shorts
- T-Shirts
- Sunscreen
- Glove
- Batting Gloves
- Bat
- Cleats
- Tennis shoes
- Batting helmet



## Wallace State Softball Camp

Sign up for: <b>Select One</b>	Time	Price
<input type="checkbox"/> Fielding and Hitting	9-12, 1-4	\$90.00
<input type="checkbox"/> Pitching and Hitting	9-12, 1-4	\$90.00
<input type="checkbox"/> Catching and Hitting	9-12, 1-4	\$90.00
<input type="checkbox"/> Pitching Only	9-12	\$60.00
<input type="checkbox"/> Catching Only	9-12	\$60.00

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

School Attending: \_\_\_\_\_

Age: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

**Waiver of Liability and Hold Harmless Agreement** - To the best of my knowledge, my child is in good physical condition and I am not aware of any physical infirmity, which would place my child at risk to participate in any way with the camp's activities. I am fully aware of risks and hazards connected with the camp. I voluntarily assume full responsibility for any risk of loss, property damage or personal injury, including death, that may engage in the camps activities, whether caused by the negligence of releasee or otherwise. I further here by agree to indemnify and hold harmless the releasee from any loss, liability, damage or cost, including court costs and attorney's fees, that may accrue related to my child's participation in this camp, whether caused by negligence of releasee or otherwise. **RELEASE AND WAIVER**- I understand that this camp is operated by the individual coach's name. The camp is not in any way owned or operated by Wallace State CC. While conducting this camp, the coaches named are not acting as agents of Wallace State CC. Accordingly, I agree to release and hold harmless the Board of Trustees of Wallace State CC, its officers, agents, and employees, while acting in their capacities as such, from any and all claims or liability which may arise in any manner or form from my child's participation in this camp.

Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Phone Number \_\_\_\_\_

Primary Position (circle one): P C 1B 2B 3B SS LF CF RF

Secondary Position (circle one): P C 1B 2B 3B SS LF CF RF

**Registration Deadline: May 15, 2009**

Make checks payable to: **Wallace State Softball**

**To Enroll:** Tear off this portion. Complete and return it along with appropriate payment to:

Wallace State Softball  
Attn: Coach Jayne Clem  
801 Main St. PO Box 2000  
Hanceville AL 35077  
Phone: (256) 352-8355  
office: (256) 233-4628  
Email: wscsoftball@yahoo.com