



REQUEST TO DISTRIBUTE FLYERS to: STUDENTS and/or EMPLOYEES

Hays CISD – 2017-2018 School Year

A COPY OF THE FLYER MUST BE ATTACHED TO THIS FORM TO BE CONSIDERED FOR
APPROVAL.

RETURN TO: Central Office Receptionist,
21003 Interstate 35, Kyle, Texas, 78640, or fax to 512.268.7121.
For more information, please call 512.268.2141.

Name of Organization: Hays High School Softball Nonprofit? ☒
Contact Person: Lisa Cone Phone: 512.268.2911 Fax: _____
Email (please PRINT): Lisa.Cone@hayscisd.net City: Buda

The Hays Consolidated Independent School District will consider requests to distribute information from **nonprofit civic and cultural organizations**. Please give a copy of this signed request form, along with your informational flyers, to the principal of the campus (es) where you wish to distribute the flyers. Flyers from **for-profit** organizations may be placed at the information table at each campus, but will not be distributed through students' backpacks.

Please be advised that each campus has the discretion to choose the method of distribution. All secondary schools and some elementary schools make the flyers available for pick-up at a central site, rather than individually to each student.

Check all campuses for which you are requesting permission to distribute or post.

Elementary Campuses

☐ All Elementary:

☐ Buda Elementary
☐ Elm Grove Elementary
☐ Fuentes Elementary
☐ Hemphill Elementary
☐ Kyle Elementary
☐ Science Hall Elementary
☐ Negley Elementary
☐ Tobias Elementary
☐ Tom Green Elementary
☐ Camino Real Elementary
☐ Blanco Vista Elementary
☐ Carpenter Hill Elementary
☐ Ralph Pfluger Elementary

Middle and High School Campuses

☒ All Middle schools:

☐ Barton
☐ Dahlstrom
☐ Chapa
☐ McCormick
☐ Simon
☐ Wallace

☐ All High Schools:

☐ Live Oak Academy
☐ Hays High
☐ Leman High

If approved, a copy of this signed form must be presented to each campus official with the flyers.

If approved, there will be a \$50 charge to for-profit organizations.

If approved, there will be a \$25 charge to nonprofit organizations. Copy of 501 C3 form required.

Please make check payable to: Hays CISD / Team Hays.

HCISD OFFICE USE ONLY

Date:

5/30/18

Signature:

Esther Leal



REBEL SOFTBALL CAMP 2018



When: June 18 - 20 (Monday-Wednesday)

Time: 9:00 AM – 12:00 PM

Where: Hays Rebel Softball Field

Who: All incoming 6th – Incoming 9th graders

Attire: T-shirt, softball pants or shorts, & cleats. (Cap or visor, water bottle recommended)

Equipment: Glove, Batting Helmet, and Bat

Cost: \$60 per person (May pay online at RevTrak, Make checks payable to: Hays HS Softball, cash)

Description: Come work on the fundamentals of softball with the Hays High School Softball Coaching Staff. The girls will work on fundamentals of hitting, bunting, fielding, throwing, and pitching along with game situations.

* Please fill out registration form and sign Hays C.I.S.D Liability Release Form on the next page. Liability Release **MUST** be signed for application to be accepted. (may turn in 1st morning of camp)

Please mail the form with payment to: Erica Castillo at the Hays HS athletic office. Campers can also pay online at haysrebels.com (camps) through the Hays CISD Revtrak.

4800 Jack C Hay
Buda, TX 78610
(512) 268-2911 *6238



**REBEL SOFTBALL CAMP
2018**



ATHLETE'S NAME _____

ATHLETE'S GRADE LEVEL NEXT SCHOOL YEAR _____

PARENT/GUARDIAN NAME: _____

STREET ADDRESS
CITY, STATE, ZIP _____

PARENTS EMAIL _____

PHONE # DURING CAMP HOURS: _____

**Athlete's T-shirt Size: Circle one (Adult) SM, MED, LRG, XL, XXL
(Youth) YM, YL**

Hays CISD Liability Release Form

Participant releases the Hays C.I.S.D., its officials, employees and volunteers from any and all liability for any claim by Participant of bodily injury, property damage, or other legal injury of any description arising from Participant's use of Hays C.I.S.D. facilities or participation in or attendance at the Camp / Event. The term "Participant" includes both the individual Participant and any parent or guardian signing this document on behalf of the Participant.

Participant further covenants and agrees that Participant or Participant's legal representatives will not assert or file any claim against Hays C.I.S.D., its officials, employees or volunteers seeking monetary or other relief of any description based on any claims released in this document

Participant agrees to indemnify and hold harmless Hays C.I.S.D., its officials, employees or volunteers from all costs and expenses of defending against such claims.

The release and indemnity obligations of Participant shall apply without regard to whether the bodily injury, property damage, or other legal injury complained of were caused, in whole or in part, by the Hays C.I.S.D., its officers, employees or volunteers.

This release does not waive any claim of governmental or statutory immunity or any other legal defense available to the Hays C.I.S.D. or its officials, employees or volunteers under Texas or federal law. By signing below I certify that I have read, understand and accept the terms of this document. I further certify that I am aware that this document contains a release of important legal rights and that I may consult an attorney prior to signing.

Event Participant Signature

Parent/Guardian Signature

Participant Printed Name

Parent Printed Name

Office Use only: Payment Received: _____ Payment Type: Cash or Check