



2019 BUCKHEAD BASEBALL All Skills Summer Baseball Camp

CAMPER INFORMATION

Last Name

First Name

Age as of 6/1/19

Date of Birth

T-Shirt Size

Address

City

State

Zip Code

Home Phone

Cell Phone

Work Phone

Parent(s) / Guardian(s) Names

Email Address

(All camp confirmations will be sent via email)

Alternate Contact Name

Alternate Contact's Phone

2019 BUCKHEAD BASEBALL ALL SKILLS SUMMER BASEBALL CAMP DATES

Camps are open to ages 4-12 and run from 9:30 a.m. until 3:00 p.m. each day.

Session 1: Monday, July 15 – Friday, July 19

Session 2: Monday, July 22 – Friday, July 26

Please check the week(s) of attendance and mail completed registration forms along with payment of \$350 per player to: **Pitching for Excellence, LLC, P.O. Box 29277, Atlanta, GA 30359**

CONDITIONS OF ATTENDANCE

In consideration of Pitching for Excellence, LLC allowing my child to attend, I, individually, and as legal guardian and/or parent of _____ (my child) do hereby release, indemnify, and hold harmless Pitching for Excellence, LLC and its owners, directors, officers, employees, agents, successors and assigns for and against, and waive any and all claims or liabilities for any injuries, losses, or damages including without limitations, injuries to my child, myself, and/or property, arising out of or incident to my child's participation in the Pitching for Excellence, LLC program whether caused in whole or in part by the negligent act(s) or omission(s) of its owners, directors, employees, or agents. **I hereby authorize staff of Pitching for Excellence, LLC to act for me according to their best judgment in a medical emergency for my child.**

Signature of Parent / Guardian

Date

INSURANCE INFORMATION

Policy Holder's Name

Insurance Company

Policy #

Medical Notes