



Bullpen Baseball Camp
July 12th – 14th, 2010
Creekside Park in Coldstream, BC
Hosted by
Vernon and District Baseball Association
For boys and girls age 10 - 13



Players Name: _____

Medical Number: _____

Parent Name: _____

Day Phone: _____

Address: _____

Evening Phone: _____

Email: _____

Cost: \$125 per player
Times: Monday 10:00 am – 1:00 pm
Tuesday 9:00 am – 12:00 pm
Wednesday 9:00 am – 12:00 pm

Pre-registration is required. Please make cheques out to Vernon and District Baseball Association (VDBA) and send along with this completed form to VDBA c/o Leigh Cieurka, 1409 29th Avenue, Vernon, B.C. V1T 1Y4. Confirmation of registration will be emailed or telephoned.

Assumption of Risk

As a participant in the program I,

(a) understand that the training involves physical activity that could result in injury to me. I assume full responsibility for any injury or damages which may occur or be caused by me in, on or about the school's premises from any cause, including without limitation and fault of the BULLPEN BASEBALL SCHOOL, it's owners, employees and agents & completely release, discharge & agree to hold harmless from all claims, damages or other liabilities, present or future, whether known or anticipated, or for which there might be any basis, that may result from or arise out of my involvement or participation in the use or intended use of the game or the premises & equipment related there to.

(b) accept full responsibility for any damage to the premises, facility and/ or equipment caused by me.

(c) agree to inform the Bullpen staff of any medical condition or treatment that I have prior to participating in the School

Emergency Contact: _____

Phone Number: _____

Signature of participant (or parent if participant is under 18 years): _____