



The 4th Annual FCA Baseball Total Athlete Skills Camp

Limited Space Available...Register Today!

Detach, fill-out and mail this form along with your check (*made payable to Gameday Baseball*) to:

Ron Hobar / FCA Baseball, 7849 Elm Leaf Dr., Germantown, TN 38138

Waiver: I hereby release, exonerate and discharge the FCA Baseball Camp or Clinic, its host site (Gameday Baseball) and its employees from any injuries incurred in the Baseball Camp or Clinic or while traveling to and from the Baseball Camp or Clinic. I agree to hold the FCA Baseball Camp or Clinic, its host site (Gameday Baseball), its employees, sponsors or agents harmless for any liability arising out of any good faith actions taken in seeking and obtaining medical care and treatment for the named minor (your son or daughter). I certify that my child is in good physical condition and can partake in the daily schedule of events.

PLEASE PRINT:

PARENT OR GUARDIAN SIGNATURE

NAME _____ AGE _____ POSITIONS _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ CELL PHONE _____

PRIMARY EMAIL ADDRESS _____

SECONDARY EMAIL ADDRESS _____

T-SHIRT SIZE (*specify youth or adult*) _____