


SUMMER CAMP 2010 REGISTRATION FORM

Please complete and return with
payment to 

Big Leagues Academy
207 Penns Trail
Newtown, PA 18940
215.968.3089

Name _____ DOB ____/____/____

Address _____

City _____ State _____ Zip _____

Ph _____ Cell _____ Emergency Contact _____

Email _____

Shirt Size (circle) Youth S M L Adult S M L XL

2010 SUMMER BIG LEAGUE ACADEMY CAMPS

\$270 PER CAMP

All camps: 9:30am - 2pm

Please select the camps you would like to attend.

June 21 - 25

DAA-Doylestown Athletic Association Complex

June 28 - July 2

UMYBL-Upper Makefield Complex

July 5 - 9

Tri-Township Complex

Pitcher/Catcher-Tri Township Complex (9:30am -12pm) **\$205 per camp**

July 12 - 16

Big Leagues Academy Hatfield Location

Big Leagues Academy Newtown Location

July 19 - 23

LAA-Middletown Community Park

July 26 - 30

Big Leagues Academy Newtown Location Softball

Big Leagues Academy Hatfield Location Baseball

August 2 - 6

Big Leagues Academy Newtown Location Baseball

Big Leagues Academy Hatfield Location Softball

\$20 Multiple Camp Discount: 1st camp starts at \$270, additional camps start at \$250

\$20 Sibling Discount: (2nd child only) 1st child's name _____

\$40 Courtesy Discount: Applies to Early Bird Registrations received by April 15, 2010 or any active NAC Member. Select only one: Early Bird NAC Member

Cash Check, made payable to: Big Leagues Academy

Credit Card (circle): VISA MC DISC Charge Amount\$ _____

Card#: _____ Exp: _____ / _____

Parent Guardian Acknowledgement

I recognize there exists a risk of injury from the activities involved in the program, and knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the releases or others, and assume full responsibility for our child's participation. I, for myself and on behalf of my heirs, assigns, personal representatives and next of Kin, hereby release and hold harmless Big Leagues Baseball and Softball Academy, BucksMont Indoor Sports Center, its officers, officials, agents, employees, other participants, sponsors, advertisers, and owners and lessors of the premises ("Releases") from any and all injury, disability, death or loss or damage to person or property whether arising from the negligence of the releases or otherwise. I have read this release of liability and assumption of risk agreement, fully understand its terms, understand that I have given up substantial rights by signing it, and sign it freely and voluntarily without inducement. No refunds will be granted; No exceptions.

Parent Guardian Signature _____ Date _____

Insurance Carrier _____ Policy# _____

Admin.
Use Only

Date Received _____ BP _____ ML _____ Confirmation _____