

# 2022 Barlow Baseball Summer Camp

<b>Camper's Name</b>	<b>Guardian Name</b>
<b>Age</b> <b>Grade (22/23 school year)</b>	<b>Phone</b>
<b>School</b>	<b>E-mail</b>
<b>Position(s)</b>	<b>Insurance Information</b>
<b>Address</b>	<b>Name of Insured</b>
	<b>Company</b> <b>Policy #</b>

**T-SHIRT SIZE (Circle one) You must register but 6/10 to guarantee a camp shirt**

Youth Small   Youth Medium   Youth Large   Adult Small   Adult Medium   Adult Large

<b>CAMP DETAILS</b>	<b>Send Registration and Payments to</b>
<b>Dates:</b> July 5th - 8th	<b>Barlow Baseball</b> PO Box 1011 Boring, OR 97009
<b>1st - 5th grade 9:00am - 11:00am</b>	<b>Contact:</b> Brady Burdick
<b>6th - 9th grade 11:30am - 1:30pm</b>	<a href="mailto:barlowbaseballinc@gmail.com">barlowbaseballinc@gmail.com</a>
<b>Location:</b> Sam Barlow High School Varsity Field	<b>Make Checks Payable to: Barlow Baseball Inc</b>
<b>Cost:</b> \$80.00	

**PLEASE READ AND SIGN BEFORE RETURNING REGISTRATION FORM:**

IN CONSIDERATION OF THE ACCEPTANCE OF THIS ENTRY, I FOR MYSELF, MY EXECUTORS, AND ASSIGNEES, DO HEREBY RELEASE AND DISCHARGE GRESHAM-BARLOW SCHOOL DISTRICT, BARLOW BASEBALL INC., ALL SPONSORS, AGENTS AND EMPLOYEES OF ANY AND ALL CLAIMS, DEMANDS OR CAUSES OF ACTION ARISING OUT OF MY CHILD'S PARTICIPATION IN THIS BASEBALL CAMP.

I ATTEST AND VERIFY THAT I HAVE FULL KNOWLEDGE OF THE RISKS INVOLVED IN THIS EVENT, AND MY CHILD IS PHYSICALLY FIT AND SUFFICIENTLY TRAINED TO PARTICIPATE IN THIS EVENT.

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_