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#### **Starz of Tomorrow Baseball Academy**

**2020 MEA Skills Camp 8th Graders and Below**

**Thursday, October 15**

**11:00am-3:00pm**

**Joe Faber Field**

Register Online at: [www.StarzBaseballCamp.com](http://www.starzbaseballcamp.com)

Or mail this form with payment to Starz of Tomorrow:

PO Box 2063, St. Cloud, MN 56302

*For More Information contact Clinic Director:*

***Pat Dolan @:*** [***Pat@StarzBaseballCamp.com***](mailto:Pat@StarzBaseballCamp.com)

### **REGISTRATION Deadline October 10th, 2020**

**Circle One:** *One Day Camp* **($75.00**) *2020 Mobile Camp Attendee* (**$50.00)**

\* Instruction on throwing, fielding and hitting fundamentals

\* Individual position practice, emphasis on skill development AND GAME FROM 2:00-3:00ppm!

\* Lunch provided

\* Starz of Tomorrow camp certificate and MVP, Mr. Defense, Charlie Hustle awards!

\* Starz Silver Slugger, Hardhat Grinder of the Day and Dealer of the Day!

### **Registration Information:**

Participant’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade\_\_\_

Family Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City \_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_

Daytime Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-Mail **(please print clearly!)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Information**

Doctor\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance coverage\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Statement of Release: I agree to release the Starz of Tomorrow Baseball Academy and all their employees of all liability related to accidents or injuries which may occur while participating in the above activity. I also give permission for emergency medical procedures to be administered if I cannot be contacted in case of an emergency.

Parent/Guardian signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

