



REGISTRATION FORM

Use This Form for Same Family Members Only and Please Print Clearly



Make checks payable to Sportstime & send to: Sportstime Corporate Office, 210 Bordeaux Court, El Dorado Hills, CA 95762

Participant's Name(s): (1) _____ (2) _____

Birthdate(s): (1) _____ (2) _____ Current League Level (Farm, Minors, Majors, etc.): (1) _____ (2) _____

Parent's Name: _____ Address: _____

City/Zip: _____ / _____ H. Phone: _____ Mobile #: _____

E-mail (print clearly): _____

Camp or Lesson Program(s): _____ Amount Pd: _____ Ck #: _____ Cash: _____

Main 2 Positions: P C 1B 2B SS 3B OF Bats: Right Left Throws: Right Left

How did you hear about us? E-newsletter Parks & Rec Newspaper League Mailer Internet Search
 Referral: _____

Discount Code: _____

CANCELLATION & REFUND POLICY

Camp or Clinic Programs: Initial _____ If you must unavoidably cancel your scheduled reservation, we require at least 10 days advance notice prior to your camp or clinic start date. If at least 10 days notice is given, a full refund will be issued less a \$30 administration fee. If your notice of cancellation is less than 14 days prior to your program start date, you will be issued a credit voucher to be applied toward any lesson or camp program for up to one year less a \$50 administration fee. If participant becomes severely ill or injured (needs signed doctor's note) before the program starts, you will be refunded your fee or issued a lesson or camp credit voucher less a \$50 administration fee. Once the program begins, there will be NO refunds issued for illness, injury, rainouts (April thru October only), vacation or disciplinary problems.

Lesson Programs: Initial _____ Lessons must be pre-paid, are non-refundable and expire one year from the date of purchase. We require at least 36 hours advance notice on all lesson cancellations. If you cancel lesson less than 36 hours in advance, your lesson fee will unfortunately be forfeited or billed to your account. Please check your calendars carefully before scheduling lessons. It's helpful to send us a list of all days and times, including all school holidays and 1/2 days, that you're available for workouts. Keep in mind, we may have students on a waiting list awaiting available lesson time slots. In wet weather, call your personal instructor at least 3 hours prior to your scheduled lesson to determine practice conditions and/or location. We will gladly re-schedule any rainouts.

GENERAL RELEASE & LIABILITY WAIVER

Initial _____ In conjunction with participation in the Sportstime Academy, the undersigned, on his/her own behalf or as parent/legal guardian of the participant, acknowledges and understands that each participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, as well as potential economic losses, which could result from his/her own actions, inaction's or negligence; the actions, inaction's or negligence of others; the condition of the premises; or the equipment used. I also understand and acknowledge that proper physical contact for purposes of teaching a particular movement during the activities is a natural part of the learning process.

Initial _____ In consideration for the opportunity to participate in the programs and activities of the Sportstime Academy, the undersigned, on his/her own behalf or as parent/legal guardian of the participant, hereby expressly and voluntarily agrees to assume all risks, whether known or unknown, of participation in such programs and activities. The undersigned, on his/her own behalf or as parent/legal guardian of the participant, further agrees not to sue and to hold harmless and forever release, waive, and discharge Steve Horning and the Sportstime Academy, their respective heirs, administrators, executors, successors, assigns, directors, employees, agents, independent contractors, and advertisers, and, if applicable, the owners, lessors, and lessees of the premises used to conduct such programs and activities, from any and all liabilities, claims, demands, losses, and causes of action that the participant and his/her parents, heirs, executors, administrators, successors, and assigns may have for injuries and damages arising out of participation in the programs and activities of the Sportstime Academy whether caused, in whole or in part, by the acts, omissions, or negligence of the releasees or otherwise. In case of emergency, I agree on my own behalf or as parent/legal guardian of the participant, that the participant may be treated by a qualified physician.

Initial _____ I have read, understand, and acknowledge the Sportstime Academy cancellation and refund policy as stated above. I also understand and acknowledge that Steve Horning and the Sportstime Academy own and retain all video and photographic rights in connection with the participant's participation in all programs and activities.

I HAVE READ THE ABOVE GENERAL RELEASE AND LIABILITY WAIVER AND UNDERSTAND THAT I FOREVER WAIVE CERTAIN RIGHTS BY SIGNING IT AND DO SO VOLUNTARILY.

Signature: _____ Print Name: _____ Date: _____

(Circle One: Participant or Parent/Legal Guardian)

***Please remember to complete and attach Medical Emergency & Health History Information form!**