Hard 90 Baseball Participation Application

Check any program(s) that may interest you:

☐ **Workouts** ☐ **Lessons** ☐ **Tournament Team** ☐ **Camps/Clinics** ☐ **Speed & Agility**

PLEASE PRINT LEGIBLY

Player Name	**Birth Date**
Street	**Parent(s) Name**
City/Zip	**Home Phone**
Mother Cell	**Father Cell**
Mother Work	**Father Work**
E-mail 1	**E-mail 2**
We will abide by any rules and regulations of Hard 90 Baseball/Arena Softball ☐ **YES** ☐ **NO**	
How do you know about us?	
List any allergies, medical conditions or limiting factors we should be aware of	
Emergency Contact Name & Phone (other than parent)	
Physician Name & Phone	
Medical Insurer & Policy No.	
I give Hard 90 Baseball and Arena Baseball permission to publish photos of my child in any medium of its choice (website, brochures, flyers, news media, etc.) without compensation ☐ **YES** ☐ **NO**	

Parental/Guardian Medical Permission, Agreement and Release from Liability

As parent or legal guardian of the above named participant I hereby give my consent for any emergency medical treatment as approved by the facility supervisor in case of injury or sudden illness. My permission is given in order to assure prompt medical treatment in my absence without undue delay. I have voluntarily enrolled my child in a program of sports training involving activities known to be hazardous. My child and I have chosen to participate with knowledge of the danger involved. We hereby agree to accept any and all risk of injury or death. As consideration for being permitted by Hard 90 Baseball and Arena Softball to have my child participate in the training program and use of facilities, I hereby agree that I, my assignees, heirs or agents or my child named above or such child's assignees, heirs or agents will make no claim against or sue Hard 90 Baseball or Arena Softball, its agents, employees or contractors for injury or damage resulting from negligence or other acts, howsoever caused, by any agent, employee or contractor of Hard 90 Baseball and Arena Softball or by any spectator or other participant. I hereby release Hard 90 Baseball and Arena Softball, its agents, employees or contractors from all actions, claims or demands that I, my assignees, heirs or agents or my child named above or such child's assignees, heirs or agents now have or may hereafter have for injury or damage resulting from my child's participation in the sports training program. I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability and a contract between me and Hard 90 Baseball and Arena Softball and sign it of my own free will.

_____	_____	_____
PRINT Parent/Guardian Name	Signature	Date

OFFICE USE ONLY

Baseball Age_____	**Birth Cert?____**	**Date received**	
Observe?____	**Database ____**	**Dist List ___**	**Acctg____**
Notes:			

SEND THIS FORM TO Hard 90, 1235 Glen Haven Ct., El Dorado Hills, CA 95762
or bring it in with you and hand it in on the day of a workout/camp/clinic.
Contact us at (877) 334-4790 with any questions, visit www.hard90baseball.com

PLAY HARD, HAVE FUN!