

REGISTRATION, PAYMENT & AGREEMENT

2024
HSLHP

Name: _____ DOB.: _____

HS: _____ Grad Yr: _____ At What Level Did You Play HS Baseball in 2023
 VARSITY JV FRESHMAN

Address: _____

City: _____ State: _____ Zip: _____

Fathers Name: _____ Mothers Name: _____ Home Phone: _____

Fathers Cell: _____ Mothers Cell: _____ Player Cell: _____

EMail^(S): _____

CHOOSE GROUP #1 OR GROUP #2

Group #1

Wed. 7-8:30PM

Sat. 11:30-1:00PM

Group #2

Wed. 8:30-10:00PM

Sat. 1:00-2:30PM

METHOD OF PAYMENT

TOTAL DUE: \$249.99

PAY BY CREDIT CARD *Visa, Master Card, American Express*

PAY BY CASH or CHECK (payable to cash). You must provide a credit card even if paying by cash or check. Cash or check payments must be presented by 10pm on the payment due dates, otherwise, payment will be processed to the credit card below.

Card # _____

Exp: _____ CVV: _____

NOTE: A 3% convenience fee will be charged to all credit card transactions and checks made out to PBI. You can avoid this fee by paying cash or check (made payable to cash)

****ALL PAYMENTS ARE FINAL AND NON-REFUNDABLE****



1300 Route 17 North, Ramsey, NJ 07446
1-800-282-4638 www.BASEBALLCLINICS.com

SIGNATURE AND AGREEMENT

REFUND POLICIES- NO cash refunds or credit vouchers will be issued under any circumstance.

MAKE-UP TIME- You will be expected to attend the sessions you signed up for. PBI can not guarantee the ability to accommodate changes made after the program has begun. Make-ups will not be provided for missed class time.

WEATHER- All programs will run according to schedule unless there is a state of emergency weather situation declared by the State of New Jersey.

HOLD HARMLESS- I hereby acknowledge that participation in any program provided by Professional Baseball Instruction (PBI) involves an inherent risk of physical injury and hereby assume all such risk and do hereby release, forever discharge, and hold harmless, PBI, all its employees and agents thereof from any and all known liability no matter the nature, arising from and by reason of any and all known and unknown, foreseen and unforeseen body and personal injuries, damage to property, and the consequences thereof, resulting from the registrant's participation in or involvement with this camp, including any failure of equipment or defect in the premises. I also hereby certify that the participant is in good physical condition and can partake in the daily schedule of events. In the case of an emergency, I grant permission for the participant to be given treatment by a local hospital. Any photographs taken at the camp are subject to be used in the brochure in future years and can possibly be used for advertising the camp. I hereby state that I am the legal guardian of the participant.

By affixing my signature below I confirm that I have read and agree to the Refund, Make-Up Policies, and Hold Harmless Agreement stated above.

Signature: _____ **Date:** _____

Are either parents and/or guardians an active member of the US military? YES NO

GOALS OF THE PROGRAM

→ Prepare players to enter their high school season at peak performance.

GROUP #1

Day	Time	February
Wednesdays	7:00- 8:30PM	2/7 14, 21, 28
Saturdays	11:30- 1:00PM	2/3, 10 17, 24, 3/2

GROUP #2

Day	Time	February
Wednesdays	8:30- 10:00PM	2/7 14, 21, 28
Saturdays	1:00- 2:30PM	2/3, 10 17, 24, 3/2

PRICING

\$249.00

9 SESSIONS

HIGH SCHOOL

LIVE HITTING 2024

TWO HITTING SESSIONS

*** CHOOSE**

Group 1 OR GROUP 2

PBI's "High School Live Hitting Program" is exactly what it sounds like—LIVE HITTING— Hit live against high school pitchers on our open field, NOT IN A BATTING CAGE. With the PBI Live Hitting program as part of your total winter training program, you'll be fully prepared and ready for your 2024 High School season.



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