

# “Own the Zone” Pitchers Boot Camp featuring Brent Strom

Today's Date: \_\_\_\_\_  
Athlete's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_  
Dad's Name: \_\_\_\_\_ Mom's Name: \_\_\_\_\_  
Dad's Cell: \_\_\_\_\_ Mom's Cell: \_\_\_\_\_  
Dad's E-mail: \_\_\_\_\_ Mom's E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Eve. Phone: \_\_\_\_\_

\_\_\_\_\_ Friday, 01/18/13 - 5pm – 9pm for Middle School & Youth pitchers (Farmingdale, NY)  
\_\_\_\_\_ Sunday, 01/20/13 - 9am – 1pm for pitchers of all ages (Glendale, NY)  
\_\_\_\_\_ Monday, 01/21/13 - 9am – 1pm for High School and College pitchers (Farmingdale, NY)  
\_\_\_\_\_ Coaches Pass – Any or All Sessions – \$99

**All Above Sessions - \$249 / player / session (or use STROM50 Discount, price is \$199.)**

\_\_\_\_\_ Saturday, 01/19/13 - 9am – 12pm High School and College pitchers (Elmsford, NY)  
\_\_\_\_\_ Saturday, 01/19/13 - 1pm – 3pm Coaches Clinic – \$89  
\_\_\_\_\_ Saturday, 01/19/13 - 3pm – 6pm Middle School & Youth League pitchers (Elmsford, NY)

**Sessions in Elmsford - \$199 / player / session (or use STROM30 Discount, price is \$169.)**

**Above & Team Discounts - four or more players registered together by 12/17/12 (call us)**

## PAYMENT INFORMATION

\_\_\_ 1. Signup online at:

<http://ownthezonepitching.com/>

\_\_\_ 2. I am enclosing a check in the amount of \$\_\_\_\_\_ made payable to:

Coach Jeff Noreman. and mail to Ballplayers Academy, Box 365, Old Bethpage, NY 11804

\_\_\_ 3. Please charge my credit card \$\_\_\_\_\_ Signature (Required)

\_\_\_\_\_ Date: \_\_\_\_\_ Credit

Card (circle one): VISA MASTERCARD AMEX DISCOVER

Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

Name on credit card: \_\_\_\_\_

Billing Address for credit card: \_\_\_\_\_

A limited pitchers will be allowed into each session. There are no prorated tuitions available. No substitutions or refunds.

For Office Use Only:

Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Initial: \_\_\_\_\_

Type: \_\_\_\_\_ Notes: \_\_\_\_\_

## Waiver and Release of Liability

In consideration of being allowed to participate in any way in the Own the Zone Boot Camp and related athletic events and activities run by or at Ballplayers Academy, Brent Strom, PREgame Sports Training, Performance Factory, Artistic Stitch, and/or Frozen Ropes of Elmsford, undersigned acknowledges, appreciates, and agrees that:

1. The risk of injury from the activities in this program is significant, including the potential for permanent paralysis and death, and while particular rules, equipment, and personal discipline may reduce the risk, the risk of serious injury does exist, and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, or others, and assume full responsibility for my participation, and,
3. I willingly agree to comply with stated and customary terms and conditions for participation. If however I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately, and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS Ballplayers Academy, Brent Strom, PREgame Sports Training, Performance Factory, Artistic Stitch, and/or Frozen Ropes of Elmsford, their officers, official agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("Release"), WITH REPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss of or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

X \_\_\_\_\_  
PARTICIPANT SIGNATURE

Date Signed: \_\_\_\_\_

FOR PARTICIPANT OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) THIS IS TO CERTIFY THAT I, PARENT/GUARDIAN WITH LEGAL RESPONSIBILITY FOR THIS PARTICIPANT, DO CONSENT AND AGREE TO HIS/HER RELEASE AS PROVIDED ABOVE OF ALL THE RELEASES, AND FOR MYSELF, MY HEIRS, ASSIGNS, AND NEXT OF KIN, I RELEASE AND AGREE TO INDEMNIFY THE RELEASEES FROM ANY AND ALL LIABILITIES INCIDENT TO MY MINOR CHILD'S INVOLVEMENT OF PARTICIPATION IN THESE PROGRAMS AS PROVIDED ABOVE, EVEN IF ARISING FROM THEIR NEGLIGENCE.

X \_\_\_\_\_ Date Signed: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE EMERGENCY # \_\_\_\_\_