

CC Fundamentals of Baseball 2026 Registration Form and Emergency Card
Location: Rick Prieto Field

Camper's Name _____
Last First Middle

Grade Level in September 2026 _____ Date of Birth _____

Mother/Guardian Name _____ Cell # () _____

Father/Guardian Name _____ Cell # () _____

Email address: _____

IF I CANNOT BE CONTACTED IN AN EMERGENCY, COACHES HAVE MY PERMISSION TO CONTACT AND RELEASE MY CHILD TO ONE OF THE FOLLOWING PERSONS:

Name _____ Relationship _____ Day # _____

Name _____ Relationship _____ Day # _____

Camp Hours: Drop off at 8:45 ~ Camp Instruction: 9:00 am-1:45 pm ~ Pick up by 2:00 pm

Cost: Sessions 1 & 3 are 4 day weeks: \$200.00 each; 2 & 4 are 5 day weeks: \$250.00 each

I would like to sign up for the following sessions:

Session 1 - June 15-18 (4 day session) _____

Session 2 - June 22-26 (5 day session) _____

Session 3 - June 29 - July 2 (4 day session) _____

Session 4- July 6-10 (5 day session) _____

Total Cost \$ _____. Pay one week in full and reserve subsequent weeks with a \$50.00 deposit per week. (Balance of subsequent weeks are due by June 15th) (\$50.00 deposits are forfeited for cancellations) No refunds for cancellations after **June 12th**. Payment by cash, check, cashier's check or money order only. **Space may be limited or capped due to staffing, grade level, and/or registrations.**

Please make check, cashier's check, or money order payable to: CCFOB or CC Fundamentals of Baseball

Mailing address: PO Box 452161, Los Angeles, CA 90045

Please check one of the following arrangements:

____ I will be picking my child up at the baseball field.

____ My child has permission to ride/walk home on their own.

____ My child will be picked up by: (if not parent) Name(s) _____

Does your child have any medical conditions/allergies that we need to be aware of: Yes ___ No ___

If yes, please explain:

Signature of Parent/ Guardian _____ Date: _____