

# 2022 Registration Form

Name of Participant \_\_\_\_\_

Date of Birth \_\_\_/\_\_\_/\_\_\_ Adult T-Shirt Size: XS S M L

Address \_\_\_\_\_ City \_\_\_\_\_

Cell # \_\_\_\_\_ Work # \_\_\_\_\_

Parent / Guardian \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Please list any medical conditions

\_\_\_\_\_  
\_\_\_\_\_

My child has permission to attend the All-Star Baseball Camp. In the event of an illness or injury, I give the staff members permission to act for me according to their best judgement, in case of an emergency. I also release the All-Star Baseball Camp, its employees and camp instructors from all liability.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Fee: \$350 for 9 days including T-Shirt

Checks payable to All-Star Baseball Camp. Please mail checks to 1291 Avon Blvd. Cheshire, CT 06410

Note: [No Camp July 2<sup>nd</sup>-July 4<sup>th</sup>](#)