

## March Camp 2020 Registration

Participants	Name:	
Address:		
City:	Postal Code:	
Home Phone	ome Phone: Cell Phone:	
Email:		
Would you li	ke to receive our newsletter and info on events: $\square$ $\mathbf{Yes}$ $\square$ $\mathbf{No}$	
Participants	Date of Birth (yyyy/mm/dd)//Sex ☐ Male ☐ Female	
	I.C.E. (In Case of Emergency) Health Card Number:  Contact: Phone#: Alternate#: Do you have any Medical Concerns:  k (Monday 16 <sup>th</sup> to Friday 20 <sup>th</sup> ) - \$249 +HST	
	ch Day (Pick which days you want) D/Day + HST D/Day + HST	
Level of base	eball played last year: Did not play ☐ House League ☐ Rep ☐ Other:	
Is before & a	fter care required? If yes: Day: □M □ T □ W □ T □ F □ AM □ PM	
Amount Pay	Vable         Camp: \$           After Care: \$         Total before tax: \$           HST: \$         Total Cost: \$	
Please charg	ge: $\square$ Deposit (Remaining amount will be charged 14 days prior to start of camp) $\square$ Full Amount	
-	formation: □ Visa □ MC #: Expiry:/	

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#### **Sibling Discounts**

If registering two or more children from the same family the second child receive \$20.00 off. If
registering three or more children, the third and beyond receive \$30.00 off their camp registration
fees.

### After Care

- After care will be provided going as late as 5:00pm.
- Additional cost for after care is \$5.00/ hour.

#### **Payment and Deposit**

- A deposit must be made at time of booking of \$50.00
- All fees including HST must be paid in full at least 14 days prior to the contract start date.
- Payment by credit card, debit card, cheque, or cash will be accepted.
- If booking is made less than 14 days prior to contract start date, payment in cash, debit card, or credit card will be accepted. Cheques will not be accepted.

#### **Cancellation Policy**

In the event of cancellation, a written cancellation must be provided to SBBC by email to <a href="mailto:info@baseballcentral.ca">info@baseballcentral.ca</a>, and the following policy shall apply:

- If cancellation is received more than 14 days prior to the contract start date, the registrant will be reimbursed all fees except for a \$50 administrative fee.
- If cancellation is received less than 14 days prior to contract start date, the registrant will be reimbursed 50% of the total Camp fees.
- If cancellation occurs during the program there will be no reimbursement of camp fees.

# DISCLAIMER OF LIABILITY & RELEASE OF CLAIMS \*PLEASE READ CAREFULLY\*

This Disclaimer of Liability and Release of Claims is to be executed by the participant, or if the participant is a minor, by the participant's parent/guardian.

Registration will not be accepted unless it has been executed.

**Disclaimer:** The participant, including his or her parents/guardians, in signing this registration form, chooses to participate in this program at his or her own risk. Smith Brothers' Baseball Central Inc. accepts no liability for bodily injury, death, property or loss due to any cause whatsoever, including, without limitation, negligence on the part of Smith Brothers' Baseball Central Inc., its elected officials, employees, volunteers, instructors and agents.

**Release:** The participant and his or her parents/guardians waive any and all claims they may now and in the future may have against, and release from all liability and agree not to sue, Smith Brothers' Baseball Central Inc., including its employees, instructors, volunteers and agents. This release includes all claims for bodily injury, death, property, loss or damage of any kind resulting in any way from participation in this program, whether caused by negligence or otherwise.

**Photo waiver**: I hereby give permission Smith Brothers' Baseball Central Inc. to take photographs of my child, children or myself as part of this program. I understand that the photographs may appear in the advertising, on Smith Brothers' Baseball Central Inc. website, and or the Facebook page.

	⊔ Yes ⊔ No	
I confirm that I have read this agreement before signing it and that I understand it and that it is binding not only on me		
and the participant but also on our helps, executors and assigns. This application will not be accepted unless signed.		
X		
Signature of Participant or Parent/Guardian	Date	