



2019 High School Youth Baseball Camp

June 3rd-6th

8:00 – 10:00 K-4 (2018-2019)

10:30 – 12:30 5-8 (2018-2019)

Mail Registration to: Granbury HS 2000 W. Pearl Granbury, TX 76048
C/O Brad Eppler

FOR OFFICIAL USE ONLY

AMOUNT PD.	
CHECK #	CASH BY

REGISTRATION IS \$75.00 Checks to: GHS Pirate Baseball

PLAYER LAST NAME	FIRST NAME (or name child goes by)	YS YM YL AS AM AL AXL SHIRT SIZE (CIRCLE ONE)
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PLAYER DATE OF BIRTH	PLAYER GRADE	PLAYER SCHOOL
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FATHER'S NAME	MOTHER'S NAME	GUARDIAN
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EMAIL ADDRESS	PHONE
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SPECIAL INFORMATION Use this section to make the Coaches aware of any special circumstances or information you feel would be helpful.

RELEASE AND CONSENT FOR MEDICAL TREATMENT and PARENT'S PLEDGE

I, the parent or guardian of the above-listed player, a minor, **AGREE** that we will abide by the rules of the Granbury Baseball Booster Club, its affiliated organizations and sponsors. Recognizing the possibility of physical injury associated with baseball programs and activities, I hereby release, discharge, and/or otherwise indemnify board members, sponsors, their employees, and associated personnel, including the owners of fields used for the programs, Granbury Independent School District, and the City of Granbury against any claims by or on behalf of the above-listed player as a result of any injury to my child whether the result of negligence or for any other cause through participation in the programs and/or being transported to or from the same, which transportation I hereby authorize. As the parent or legal guardian of the above-listed player, I hereby give consent for emergency medical care prescribed by a duly licensed doctor of medicine or dentistry. This care may be given under whatever conditions are necessary to preserve life, limb, or well being of the above-listed player.

1. **I agree** to obey all of the rules and follow all safety procedures involved with this program established by the GISD and Granbury Baseball Booster Club
2. **I certify** to the best of my knowledge that my child's current physical condition is satisfactory for participation in the Baseball camp and that my child is free of any health problems that would endanger his/her participation or that of any other child in the program. I will inform the coaches should his/her condition change at any time during his/her participation in this program.
3. **I AGREE to obey all the rules and follow all safety & conduct procedures involved with this camp established by GISD.**
4. **I agree** that Granbury Baseball Booster Club may photograph or videotape my child while participating in sponsored event and activities. Further, Granbury Baseball Booster Club retains the rights to use these visual images in any manner without compensation to my child or me.
5. **I am aware** of the risk associated with parking at or near baseball fields and agree to indemnify and otherwise absolve property owners or GISD of any claim arising from damage to a vehicle caused by a ball in play.

PARENT/GUARDIAN SIGNATURE	DATE
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Receive instruction from High School Baseball coaches & former GHS/Collegiate Players. This camp will give you the foundation for solid baseball Skills and drills used by the Granbury High School Baseball Program.

****** Please register for the camp appropriate for your child's age group. Due to the number of campers and level of play, we will not be able to accommodate younger campers during the second session. We appreciate your understanding. ******