

Prune Packer Baseball Camp

For Mark West Little League

Saturday, June 17, 2017
1:00-3:00 at Recreation Park in Healdsburg
\$25

Instruction by Joey Gomes, Prune Packer Manager, and 29 elite college players. Camp is for ages 8-14, and only 30 participants. To reserve your spot, call 473-9409 or email laurie.north@comcast.net. Bring attached paperwork and check or cash the day of the clinic.

Healdsburg Prune Packers Baseball Club, Inc. dba Prune Packers Baseball Camp



Medical Authorization/Waiver & Release of Liability

•	•	ed and signed form to Camp.
Sex Age		
Address		
City	State	Zip Code
		Evening Phone
Email Address		
Phone number and conta	act information	on (if different) while this Participant is at
Camp		
Emergency Contact Nam	ıe*	
Emergency Contact Phon	ne*	
*If above cannot be reac	hed	
Health & General Medi	cal Informat	cion
If the Participant should	be restricted	from any activity, please explain:
	taking medic	ation during the Camp, please indicate drug
		or medical history that will/may require
special attention:		
-	, ,	nditions that the apply:
[] High Blood Pressure	[] Diabetes [J Asthma
Dlagga shash if the Dagg	i sin ant bas I	IAD and of the fellowing
_	-	HAD any of the following:
[] Pneumonia [] Cnicke	n Pox Mu	mps [] Measles [] German Measles
I /wa contify that the De	rticinant ic	physically able to participate in Camp
		ictions, physical impairments, or
		nit his/her participation. I/we understand
, 2 -	•	will not administer any physical
		ill rely solely upon the Medical Information
above.	ipani anu Wi	in rety solety upon the Medical Information
anuve.		

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Camp Terms & Conditions/Waiver & Release of Liability

READ BEFORE SIGNING

By signing below, I/we (Parent/Guardian of Participant/Participant) agree to the following terms and conditions of participating in the Camp provided by Prune Packers Baseball Camp.

- **1. Medical Condition & Authorization**. I/we have completed and signed the attached Medical Authorization. I/we give permission for Participant to receive emergency medical or surgical treatment and hospitalization if necessary. I/we hereby authorize directors, coaches, staff and associates of Prune Packers Baseball Camp to act on my behalf according to their best judgment in any emergency requiring medical or surgical treatment and hospitalization if necessary.
- **2. Financial Responsibility & Insurance.** I/we will be financially responsible for any medical attention needed during the Camp or resulting from an injury received at Camp. I/we represent that I/we have adequate health and medical insurance coverage for Participant covering any and all activities related to the Camp, which shall be the insurance coverage for any medical treatment. I/we also understand and agree that Prune Packers Baseball Camp shall not be responsible or liable for any expense, medical treatment, or compensation for any injury to Participant.
- **3. Compliance with Camp Rules.** I/we understand and agree to comply with all of the Prune Packers Baseball Camp rules, policies, and requirements for participation (Camp Rules), including any rules or conditions of any hotel or transportation service provider in which Participant uses during the Camp. I/we agree that if Prune Packers Baseball Camp observes any concern regarding Participant's readiness for participation in the Camp, or Participant's failure to comply with the Camp Rules, Prune Packers Baseball Club may remove Participant from the participation. Also, I/we hereby release and forever discharge Prune Packers Baseball Camp and its representatives from any and all claims, actions, damages, or liabilities (including attorneys' fees and costs), arising from or related to Participant's participation in the Camp.
- **4. Assumption of Risk of Camp Activities**. I/we understand the risk of possible injury to Participant from the activities involved in the baseball Camp, including the potential for permanent disability and death. The term "activities" also includes: travel to and from Camp, activities on and off the field, and activities before and after field instruction. I/we (Parent/Guardian/Participant) knowingly and freely assume all such risks, both known and unknown. I/we assume full responsibility for participation in Camp by Participant.

- **5. Release & Hold Harmless.** I/we for myself and on behalf of Participant, hereby release and hold harmless Prune Packers Baseball Camp and its representatives and, if applicable, the owners and lessors of the premises used to conduct the Camp, regarding any and all injury, loss or damage to person or property incident to Participant's involvement or participation in Camp activities, to the fullest extent permitted by law.
- **6. Payment**: Registration must be paid in full prior to attending Camp.
- **7. Cancellation Policy:** A full Camp credit will be issued to you if for any reason you must cancel your Prune Packers Baseball Camp registration. Credit is good for the current season or following Camp seasons. Prune Packers Baseball Camp reserves the right to cancel a Camp for any reason without prior notice. In this case, full refund will be given for all monies collected from you by Prune Packers Baseball Camp.
- **8. Publicity**. I/we understand and agree Prune Packers Baseball Camp retains the right to use, for publicity and advertising, photographs of Participants taken at Camp.

I/WE HAVE READ THESE CAMP TERMS & CONDITIONS AND WAIVER & RELEASE OF LIABILITY. I/WE FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I/WE HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Time traine (Tarene or Begar duar duar).	
Participant Name	
Signature	
Date	

Print Name (Parent or Legal Guardian).