2010 Summer Camp Registration Form

Last Name First M.I.

Position(s)

Club and/or League

Birth Date Age

Home Address

Parent / Guardian Names

City / State / Zip Code

E-Mail Address

Home Phone Cell Phone

How did you hear about MVP Sports Technology?

To register for additional services, pay for camps and/or establish an account with MVP Sports Technology, please provide your credit card information below:

Name on the Card	Card Number	Exp. Date	3 Digit CVV #	Billing Address for the card

Please note the Camp(s) you will be attending. Fax to: (949) 707 - 5998 or scan and e-mail to rcorral@mvpst.com

Dates	Loc				Dates	Loc		
July 26-30	Chap	$150			Aug 2 -6	Chap	$150	

Waiver of Liability

You represent (1) that you understand that participating in the MVP Sports Technology programs includes an inherent risk of injury to persons and property, (2) that you are in good physical condition and have no disability, illness or other conditions that could prevent you from participating in baseball related activities without injuring yourself or impairing your health, and (3) that you have consulted a physician concerning an exercise program that will not risk injury to yourself or impairment of your health. Such risk of injury includes: injuries arising from or relating to use by your or others from or relating to participation by your or others in supervised or unsupervised activities or programs; injuries and medical disorders arising from or relating to participating with MVP Sports Technology such as heart attacks, strokes, heat stress, sprains, strains, broken bones, and torn muscles, tendons, and ligaments, among others; and accidental injuriesoccurring anywhere on the MVP Sports Technology facilities. If you have any special exercise requirements or limitation, you agree to disclose them to MVP Sports Technology. You hereby agree that participating in the MVP Sports Technology services, programs, and premises are undertaken by you, at your sole risk. You hereby release and hold MVP Sports Technology harmless from, and hereby assume all responsibility for, all claims, demands, injuries, damages, actions, or causes of action whatsoever, to persons property, arising out of, or connected with, your use of MVP Sports Technology facilities, premises, services, and/or programs. As used herein, the terms "include," "including," nd words of similar import are descriptive only, and are not limiting in any manner.

Signature of Player

Date

Signature of Parent / Guardian (if player is less than 18 yrs old)

Date

Please Print Parent / Guardian Name

Relationship to Player