Class/Clinic/Lesson Enrollment Form

773-588-BASH
www.bashsportsacademy.com

Parent/Legal Guardian Name / Address

City / State / Zip / Email Address

Home Phone / Cell Phone / Work Phone

Student's Name	Age	Activity	Start Date	Member	Fee	Additional Information
				Y N		
				Y N		

In consideration of participating at BASH Sports Academy, I, the participant's parent and/or legal guardian, represent that I understand the nature of this Activity and believe the participant to be qualified, in good health, and in proper physical condition to participate in such Activity. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue the participant's participation in the Activity. I fully understand that this Activity involves risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by the participant's own actions or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "Releasees" named below, and that there may be other risks either not known to me or not readily foreseeable at this time, and I fully accept all such risks and all responsibility for losses, cost and damages I incur as a result of the participant's participation in the Activity.

I hereby release, discharge and covenant not to sue BASH Sports Academy, LLC, its respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses or damages, on my account caused or alleged to be caused in whole or in part by the negligence of the "Releasees" or otherwise, including negligent rescue operations and future agree that if, despite this release, waiver of liability, and assumption of risk, I, the participant, or anyone on my or the participant's behalf makes a claim against any of the Releasees, I WILL INDENMNIFY, SAVE AND HOLD HARMLESS each of the Releasees from any litigation expenses, attorney fees, loss liability, damage, or cost any Releasee may incur as the result of any such claim.

I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid, the balance, notwithstanding, shall continue in full force and effect.

Printed Name of Parent or Legal Guardian

Signature of Parent or Legal Guardian

Date

Terms & Conditions

1. All activities must be paid for in advance.
2. You must cancel class, clinic or lesson participation at least 24 hours in advance or you will be charged for the activity.
3. Failure to attend a lesson without notice results in the loss of lesson fee and lesson.
4. Lesson cancellations or changes made at least 24 hours prior may be rescheduled without penalty.
5. Unused lessons are non-refundable and may only be transferred to other family members.
6. Pitching lessons require a catcher, which you may supply. If BASH supplies a catcher, a $7 fee per lesson will apply.
7. Theft is grounds for dismissal from activity and you will be billed for items stolen.

Payment Type Cash: _____ Check: _____ Credit Card: _____

Credit Card Visa MC Discover

Credit Card Number _____

Exp. Date _____ CVV Code (3 digit code on back of card) _____

Total _____

Card Holder Signature _____