



THE BALLPARK IN MT. PROSPECT REGISTRATION & WAIVER FORM

WELCOME TO THE BALL PARK MP! Please print the athlete's information below:

Last Name: _____ First Name: _____

Parents' Name(s): _____ Current Team: _____

Home Address: _____
Street City State Zip

Gender: Male Female Date of Birth: ____/____/____ Age: _____

School Attending: _____ Grade: _____

E-Mail Address (required): _____

Home Phone: () _____ Cell Phone: () _____

HOW DID YOU HEAR ABOUT US? _____

By signing below, I agree to comply with all BPMP House Rules and Terms & Conditions (refer to back of form)

PLEASE ALSO SIGN THE BACK OF THIS FORM

Signature: _____ Date: _____

Parent or Guardian Signature: _____ Date: _____

THANK YOU FOR YOUR BUSINESS!

Office Use Only: Phone In Walk In Referred By: _____

Entered Into System By: _____ **Date Entered:** _____

THE BALL PARK MP HOUSE RULES:

1. **Helmets must be worn at all times when hitting in the batting cages.**
2. Athletes must wear a protective cup when in the batting cages.
3. BPMP is a drug free environment. Alcohol and tobacco products are strictly prohibited.
4. No gum, food, or drinks (other than water) are allowed in the turfing workout area.
5. Proper athletic attire required (no jeans) – only gym shoes or turf shoes allowed (NO METAL SPIKES).
6. Bats may only be swung inside the batting cages and designated hitting areas.
7. Swearing or use of vulgar language is strictly prohibited.
8. BPMP is not responsible for lost or stolen items.
9. **Only players with scheduled training times are allowed in the batting cages. All others (including parents and siblings) must remain in designated seating areas.**
10. Please hold all comments until the end of the lesson. Instructors will be available to discuss the progress of your son/daughter upon completion of the lesson.
11. Bring a strong work ethic, positive attitude and ALWAYS HAVE FUN!

THE BALL PARK MP TERMS & CONDITIONS:

1. **CANCELLATION POLICIES:**
LESSONS – All clients must provide at least 24 hour notice when cancelling a scheduled lesson. Failure to provide at least 24 hour notice will result in the client being charged for the lesson.
CAGE RENTALS – If you fail to show up for a scheduled cage rental, you will be charged a fee. Members are allowed to schedule cage rentals for 30 minutes per day, per member - based on availability
2. Memberships do not guarantee time slots for lessons or tunnel use – scheduling is based on a first come, first serve basis and is subject to availability.
3. Prices are subject to change at any time and without notice.
4. **Payment is due prior to receipt of goods and services. Lessons and Memberships are non-transferable and non-refundable.**

CONSENT & WAIVER:

The undersigned hereby represents and certifies that he/she is at least 21 years of age or is signing this consent and waiver as the parent or legal guardian of an individual under the age of 21 who will be obtaining baseball/softball instruction from The Ball Park in Mt. Prospect (BPMP), and is signing the consent and waiver with respect to the participation of the undersigned in baseball/softball instruction provided by The Ball Park, LLC (d.b.a. "The Ball Park in Mt. Prospect").

The undersigned hereby fully and unconditionally authorizes the employees, agents, officers, directors, coaches, staff and associates of BPMP to provide baseball/softball instruction for my benefit or for my minor child or for the individual for whom I act as legal guardian. I hereby represent, warrant and certify that I (or my child, or the minor for whom I act as legal guardian) am (is) physically capable of participating in the BPMP instructional program. I understand and agree that neither BPMP nor any individual or entity retained by BPMP, nor any of BPMP officers, directors, agents, employees, coaches, staff or associates will administer physical examinations to me or the minor child for whom I execute this consent and waiver and that BPMP will rely solely and exclusively upon the information provided by the undersigned relative to my physical condition or that of my minor child or the individual for whom I act as legal guardian.

The undersigned further understands and agrees that I, my minor child or the individual for whom I act as legal guardian, will be engaging in activities that involve a significant risk of serious injury that may include permanent disability or death. The undersigned further understands and agrees that significant adverse financial consequences may result as a result of injuries sustained in connection with engaging in these activities and that such injuries and adverse financial consequences may arise from the actions, inactions, and/or negligence of the participant engaging in these activities, the condition of the premises, the actions, inactions or negligence of other participants and the inherent nature of the equipment utilized in connection with these instructional programs. The undersigned knowingly and voluntarily assumes the full and complete risk of injury, death, and adverse financial consequences that may arise in connection with the participation in these activities and hereby fully and completely remises, releases, discharges, waives and relinquishes any and all actions, claims and causes of actions for personal injury, wrongful death and any adverse financial consequences that may occur in connection therewith that may arise with respect to the undersigned, the undersigned minor child or the individual for whom the undersigned acts as legal guardian against BPMP, its officers, directors, shareholders, agents, employees, coaches, staff, associates, affiliates and sponsors.

The undersigned authorizes BPMP and its officers, directors, shareholders, employees, agents, coaches, staff and associates to act on behalf of the undersigned utilizing reasonable judgment in any emergency situation requiring medical attention. The undersigned hereby specifically gives permission to BPMP and to its officers, directors, shareholders, agents, employees, coaches, staff and associates to arrange for provision of emergency medical services and/or hospitalization, if necessary, for the benefit of the undersigned or the minor child of the undersigned, or for whom the undersigned acts as legal guardian. The undersigned agrees to be financially responsible for any and all such medical attention that may be required as a result of any injury that occurs in connection with the instruction provided by BPMP and that the undersigned medical insurance shall be utilized in connection with any such treatment.

Parent/Guardian Signature: _____

Name of Athlete: _____

Date: _____